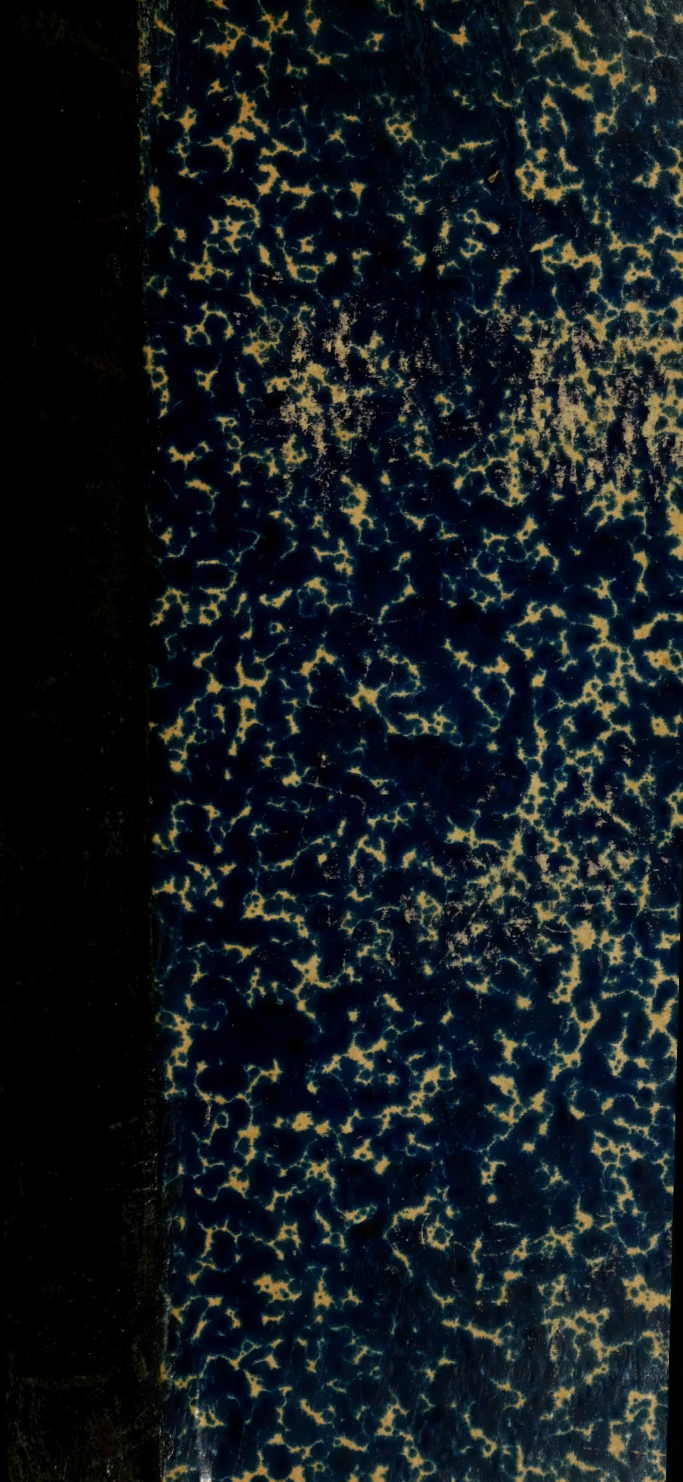






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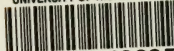
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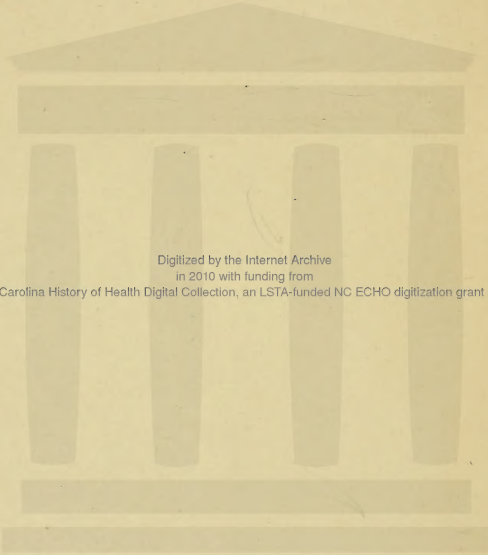


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Pharmaceutical Products of The Farbenfabriken vorm. Friedr. Bayer & Co.

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URIC ACID SOLVENT.

PIPERAZINE dissolves uric acid and its compounds, and is indicated in the Uric Dyscrasia, Acute and Chronic Gout, Renal Colic and Urinary Hemorrhage. A drawback to the use of Piperazine has been its high cost, an important matter in the medication of diathetic patients who, to get the best effects of the remedy, must

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A safe and effective derivative of phenol and salicylic acid. Indicated in rheumatism and allied maladies.

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A Prompt and Effective dressing, for all external and cavital lesions. Safe, convenient and odorless.

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THE safest and most effective antipyretic and analgesic. Indicated in fevers, and all painful conditions.

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AN antimycotic, indicated in ring-worm, scabies, pityriasis, and the parasitical dermatoses in general.

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SUBSTITUTE for iodoform, cicatrizing, and local dressing for catarrhal, ulcerative and luetic lesions.

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Because it is in strict compliance with "The Professional Code of Ethics," and being the only product of the kind giving its formula, which is as follows:

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Use full strength only in the mouth. Dilute with water when used for other parts.

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It acts mildly and quickly on all congested parts, and is pleasant to the taste.

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It may be used freely as a gargle.

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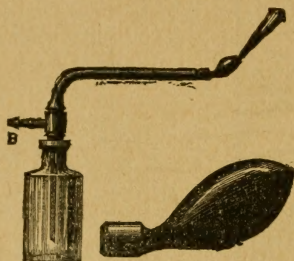
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It will digest more starch in a specified time than saliva can.

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Teaspoonful equals two grains of the Sul-
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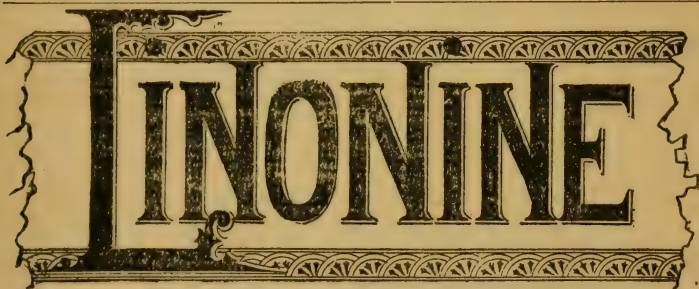
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This oil is made from the carefully selected seeds by a special process, which removes all foreign substances. By this process only, rancidity is avoided.

It Keeps Perfectly in Any Climate.

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Hypophosphite of Iron, Oil of Eucalyptus, C. P. Althaea Officinalis, Dilute

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By proper mixing, it makes a pleasant, slightly flavored cream, which is acceptable to the most delicate stomach.

It is more palatable, and of greater therapeutic value than emulsions of cod liver oil.

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PRICE ONE DOLLAR PER POUND

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Syr: Hypophos: Comp:

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The formula of this preparation shows a combination not to be found in any other tonic. Two of the ingredients, *Pepsine* and Lactic Acid (the best digestives known), have been added to a combination of Hypophosphites with Strychnine and Arsenic, and thus aids digestion when acting as a tonic. It is a *perfect Tonic* for convalescents. It has no equal in the treatment of Pulmonary Tuberculosis. It is carefully prepared by a competent pharmacist and offered to the practitioner as a *Superior Medicine*.

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This preparation produces results which can not be obtained from the use of commercial Bromide substitutes.

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Properties:—Antiseptic, Antizymotic and Disinfectant.

Useful as a General Sprinkling Powder; with positive Hygienic, Prophylactic and Therapeutic properties.

Good in all affections of the Skin.

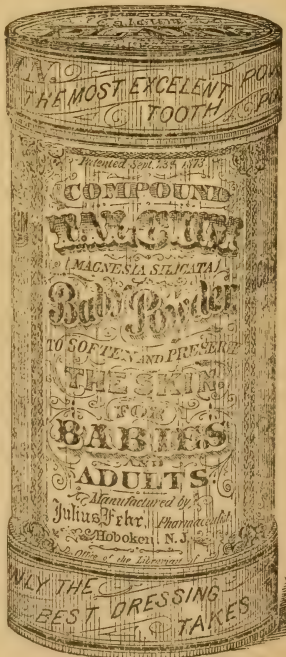
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It is proposed as possessing the good without the evil qualities of Chloral.

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N.B.—We also make a 25 per cent. strength. Price per Pint \$2.

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Nutritive, Tonic, Alterative.

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A Very Valuable Combination.

Lime Juice and Pepsin, Valuable Digestive Agent.

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Dyspepsia, Indigestion or any Digestive Disorders.

Phosphoric Elixir, Modified Form Chemical Food.

Elixir Paraldehyd, Hypnotic, Sedative, Anodyne. **Wine Coca,** Nerve Stimulant.

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It is a Cereal Food, Palatable, Nutritious and salutary.

Testimonials with comparative analysis mailed on application.

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The World's Antipyretic, Analgesic and Anodyne.

EXCELLENT in all kinds of Headache. SAFE and

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CEREBRINE from the brain, for diseases of the brain ;

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A Scientific Blending of True Santal and Saw Palmetto in a Pleasant Aromatic Vehicle.

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ever wished for an antiseptic equal in action to Iodoform, and free from its characteristic odor?

If So

we would be pleased to send you a sample of IATROL. It is

Superior to Iodoform

in action, and is absolutely odorless and non-toxic.

IATROL,

from the Greek, meaning to heal or dress a wound—is an Oxylo-do-Menthylo-Analide, obtained by the action of Nascent Iodine upon one of the Aniline group.

Three times lighter

than the iodoform, the economy of its use as a dusting powder is evident.

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The Most Powerful Neurotic Attainable,
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An efficient and permanent preparation REMARK-
ABLE for its efficacy and THERAPEUTIC EFFECTS
in the treatment of those NERVOUS AFFECTIONS
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A Reliable and Trustworthy Remedy for Relief of

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NEUROSINE is the result of an extended pro-
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No. I.

Original Communications.

A Clinical Study of Gelsemium Semperviveus.

By A. ATKINSON, M. D., late Prof. Pract. of Medicine Baltimore Medical College,
Baltimore, Md.

Written Especially for Charlotte Medical Journal.

We term a condition rheumatic when we find it attended with pains, differing in many particulars the one from the other, and differing too as greatly in their locations; thus we term a pain rheumatic whether it displays itself in the joints, in the continuity of a limb, in the muscles even remote from the joints, or in the sheaths of the nerves or in the terminals. Nor is it so easy for the experienced practitioner to differentiate between a case of sub-acute rheumatism proper, a case of severe myalgia (muscular rheumatic pain) and a case of long continuance of true painful dermatitis. In mild cases, or in positions where the myalgia most frequently occurs, it is less difficult; but it is not always our good fortune to find our patients suffering first where the nature of the tissues would most naturally suggest the seat of disease.

Dr. J. E. Garretson, in his System of Oral Surgery, says: "Correctly speaking, every pain is a neuralgia. * * * Rheumatism is always accompanied with vascular perversion; as a general thing it is a soreness rather than sharp, acute, concentrated pain. It is decidedly inflammatory in its local manifestations. It is quite proper to say rheumatic gout or gouty neuralgia. * * * The cause to be removed in rheumatic neuralgia is rheumatism; in gouty neuralgia it is gout."

Dr. Austie says: "Pain involves a lowering of function," and it is in the feeble that we most frequently see the form of rheumatic neuralgia unattended by objective symptoms, the patient alone taking cognizance of annoying pains which the inflammatory

action is not high enough to exhibit to the physician and which in some cases the poor patient has to bear without sympathy, just because the symptoms are enough to put him in great distress, yet not enough to elicit investigation or even treatment. Still, the suffering is great, even though there be neither redness, swelling or appreciable increased heat in the parts. This is especially seen in the form termed occipito-scapular subacute rheumatism, or in cervico-bronchial myalgia or neuralgias, which if left unattended, or insufficiently or improperly attended, may persist indefinitely, becoming more and more unbearable, and may even run into a contorted condition of the neck and head, being more and more intractable, but which, even in severe cases, will often respond beautifully to the action of the usual anti-rheumatics; and even when we find our remedies doing most good they all at once derange the stomach, causing both increased suffering and delay in the treatment.

Rosenthal says: "In referring to the cause of circumscribed muscular pain, experience teaches that the vast mesh-work of peripheral nerves is most threatened with danger when the body, overheated and covered with abundant perspiration, is suddenly exposed to the action of cold, or quickly passes through various strata of air at different temperatures." He continues further on: "The affections which are caused by moisture or cold are limited, in the majority of cases, to *small spaces*." In some such cases the pain attendant on the duration of the cold to the part is severe, likened by the patient to the gnawing of a mouse near the bone, to the crunching of the bone near by, to the sticking of pins and needles in the skin and muscles beneath, and so soon as reaction shall set in, the blood returning to the part produces a burning, as of a hot plate (often not larger than a silver dollar) in the part, for an hour or longer. At times the access of cool air to the part will bring on a knotted condition of the muscles over the shoulder, in the deltoid and in the upper back portion of the triceps, attended with pain and alleviated by rubbing simply with the common soap liniment, even though a similar rubbing with a warm mixture of tincture of belladonna and aconite root, diluted with one-third part warm water, had failed to afford the least relief, and after the anodyne plaster and the porous plaster had failed to keep the part warm or to assuage the local pain—all of them, on the contrary,

serving to add to the circumscribed burning without imparting to the surface around the warmth calculated to relieve the coldness. The Papier Fayard applied thickly over the back of the neck, shoulder, and down the back of the arm and over the elbow, does appear to afford the proper degree of warmth and an abatement of the growing nibbling pains before referred to. Friction at first often gives pain, when very gently applied even, but persevered in for a few moments always eases the pain and dispels the knotty muscles.

Here, then, appeared an indication for an agent, which without stupefying would afford relief from the characteristic pain through an extensive part, where every motion of the arm and neck caused agonizing suffering. The patient was unwilling to have the hypodermic use of morphia, and as Bartholow claims that the sensory position of the spine was affected by gelsemium, that drug was resorted to with benefit.

Says Rosenthal in his work on nervous diseases: "In many instances muscular rheumatism appears to be a neuralgia of the *cutaneous* and muscular branches of the nerves, which have been subjected to the action of cold. Bean has shown that the superficial muscles (the occipito-frontalis, the deltoid, trapezius and sacrolumbalis) are most sensitive to cold. In order to preserve the affected muscles from further injury, a reflex contraction occurs in the adjacent muscles. Thus in rheumatism of the deltoid, the arm is pressed against the trunk by the action of the anterior and posterior walls of the axilla; in rheumatism of the trapezius, the diseased muscle is relaxed by the contraction of the sterno-cleido-mastoid on the opposite side; in lumbago, the vertebral column is deflected to the opposite side by the contraction of the quadratus-lumborum (perhaps also of the intercostal muscles). The treatment must be regulated in accordance with the pathogeny of the case." No two cases will respond alike to the same treatment.

Rosenthal also teaches "that muscular rheumatism long kept up may eventually form a mask under which serious afflictions may remain concealed for a long time, and that progressive muscular atrophy, vertebral caries and other spinal affections, are often mistaken, in the beginning, for muscular rheumatism, although more careful examination would reveal certain motor and sensory disturbances and certain electrical reactions, which would demonstrate the danger of the situation."

TREATMENT.—It is useless to refer to venesection in this day. It is still resorted to with best results in the diseases of the upper countries which are sthenic, but it would not do in malarial districts, nor could the physicians in our large cities be induced to resort to it. To shorten an attack of rheumatism in a malarial country, quinine always comes in well, in free doses too, especially in salicylate of quinine or of cinchonidia salicylate, even in cases where the stomach will not tolerate the sodii salicylate. In many cases in tidewater a few doses of the quinine sulphate or bisulphate with alternate doses of sodii salicylate, are often all we require, beyond a brisk saline purge, while in the higher regions we want the salicylate sodium with slightly watery doses of the tart. sodat potass, affording both the alkalies, soda and potash to the blood, and being a slightly watery aperient too. Indeed, in many cases, the Rochelle alone affords a satisfactory treatment in drachm or even half-drachm doses, given largely in water and aided by an anodyne if there is much pain, or simply some hypnotic if there is difficulty in sleeping at night.

Beyond all question, the most efficacious way to begin the treatment of rheumatism in the adult is to give a one-fourth grain of morphia hypodermically—but once the patient has tasted the sweet relief afforded thereby he is apt to be content with nothing less, and there are many dangers lurking around the hypodermic needle; indeed, it has been stated that as many as 20,000 persons in one of our large cities alone resort to its use.

Next in the writer's experience comes the deodorized tincture of opium, administered in camphor water with or without the bicarbonate of potash or the bromide of potash, so as to represent the alkali as an anti-rheumatic as well as to lessen the chances of stomach derangement from the opium and possibly to avert the likelihood of valvular trouble, say xxv to xxx drops of the tincture to 15 grs. of the bicarb. or the bromide at LATE bedtime, and to give the salicylate sodium with the Rochelle salts during the day, say 20 grs. of the salicylate every 3 or 4 hours until the patient complains of too much perspiration, of cinchonism or of too much freedom of the bowels. Many persons cannot bear the physiological action of colchicum as used by the British physicians, and to push the drug as suggested by Dr. Garrad until you get the cholagogue effect is often to so derange the stomach and duodenum as to stop all remedies.

It has been thought that belladonna was the anodyne par excellence in neuralgia and that, though it does not remove pain as do the opium preparations, yet with free doses of quinine it was thought to *stave* the paroxysms off day by day until they ceased. More certain good is to be found in morphia or in codeia combined with the same amount of quinine, or as the writer has found in the persistent use of cinchonidia salicylate with the normal tincture of gelsemium semperviveus (Messrs. Parke, Davis & Co's) in *frequent doses* to accomplish more than anything else. This was in a case of severe muscular rheumatism of the neck, shoulder and right arm. The gelsemium was given to *benumb* the existing painful condition of the terminal nerves of the parts affected. With the gelsemium were given sometimes five and sometimes ten grains of the salicylate cinchonidia three times a day. As the head symptoms increased or as the sweating became very troublesome the salts was slackened up; but the jassmine kept up until by *night* the lids would feel heavy, and at times it would be impossible to raise them. THEN the drug would be stopped until NEXT DAY, in the interval giving the Rochelle. During the day the jassmine and salicylate cinchonidia, and either rest or the alkali during the night.

In the case referred to, the treatment was begun with twenty grain doses of the sodium salicylate and forty grains of the Rochelle, after a full purgation; phenacetine sometimes to benumb the pain, sometimes acetanilid, antikamnia in free doses, and when at the worst in the dead of night, if all else failed, the deodorized tincture of opium, as stated above.

In every instance where the tinc. gelsemium was given there was decided expression by the patient that the head and eyes were affected with heaviness, and the pain in shoulder and arm was less. Some physicians think they have seen excellent results from the gelsemium in intermittent fever. The writer can give no experience in this particular, as having practiced for many years in a malarial country, where diseases run their course rapidly, he did not care to depend on agents whose power and reliability were not fully recognized. His first attention, personally, was called to the action of the gelsemium in the case of a lady in 1870. who visited a neighboring city and who, for a pain over the brow, was given a prescription which was filled in that city. She took the remedy

for some days and returned home. The next morning at day break, on awaking, she could not open her eyes. Becoming alarmed and fearing amaurosis, gloucoma and all other forms of blindness, of which she had heard her father, a physician, speak, she sent at once for me. Thinking I could recognize the tincture of yellow Jassmine, by the taste and smell, and having known from clinical reports the action of the drug in producing ptosis, I directed her to stop the medicine and wrote to the druggist for a copy, by the next mail, of the prescription, which proved to be the tinct. gelsemium. It *had cured* the neuralgia, but had *caused great anxiety* both in the lady and in her friends. Often the trouble in administering the stronger fluid extracts and tinctures lies in the fact that the alcohol will evaporate and the extractive material will gum up and fall to the bottom and sides of the bottle, and though you may administer a properly assayed article, you will now and then get too much of the active principle and trouble will follow; then too people keep medicines too long and they become uncertain and irregular in their action. It is safe in administering strong drugs, when we can readily procure the alkaloid safely and properly adjusted, to prescribe the article put up by some reliable manufacturer, seeing that it has not been kept too long, and such active drugs are accurately and beautifully put on the market in a soluble form by the Messrs. Schieffeleins of New York, and even though we have a granule which presents all the appearance of freshness and complete solubility, a good plan is to put it in water a few minutes before administering it, or to stick a hole in it and let the patient swallow it in a half softened state.

There is no question but that gelsemium will afford relief in many cases of neuralgia, but it must be pushed far enough to secure its physiological effects, just short of injury, if we expect to obtain full relief.

In facial neuralgia Massini has found that twenty minims *every half hour*, for three doses, almost invariably cures. This we would call getting its full effects—one dram of the tincture in one hour and a half. The writer has known the jassmine to be used in ovarian neuralgia, by a prominent physician of this city, but did not see any special good from it. Some physicians think well of it as a heart sedative in place of digitalis, of aconite and of the veratrum viridum, but its action is unlike that of digitalis, and far

less than that of either veratrum or aconite in pneumonia and inflammatory rheumatism, while its much larger doses and smaller results leave more to be expected from the other agents, while colchicum is very uncertain and in full doses too drastic in its effects to be any longer a favorite.

Prof. Hartshorne remarks that cases of neuralgia, which will not be benefitted by iron, are *few indeed*, and we see this illustrated every day in the use of the chalybeate (Blande's) pill in anæmic females (chlorotic), most of whom are the subjects of neuralgia and I think it was Neimeyer, who said it was the chalybeate pill which first gave him his reputation from the almost universal success which followed its use in females.

The writer has determined in his next case of severe muscular rheumatism or of neuralgia that he will combine the gelsemium tincture with muriate of ammonia and as large doses as the patient can tolerate of the tincture of Iron.

A Clinical Lecture on the Treatment and Symptoms of Hip Disease.

BY PROF. L. A. SAYRE.

Reported for the Charlotte Medical Journal.

This patient, a boy seven years old, is presented as an example of a common and serious malady. His family history is good. His personal history has been good previous to last March. At that time he complained of a pain in the right knee, and on arising in the morning he walked with a limp. Toward the middle of the day, if he exercised, this limping would disappear. As time went on it became more pronounced and was constant. The child's mother tells me that she considered it a trivial matter and due to growing pains. As the symptoms became more marked she consulted a physician who told her the child had rheumatism. The mistake of diagnosing this disease as rheumatism and as growing pains is so frequently made that I cannot too strongly impress upon you the importance of being able to recognize hip disease in its incipency. Mark well the symptoms presented by this boy: a limping gait, and pain in the inner side of the knee joint, mostly marked in the morning. This pain is reflected from the seat of the disease, as the obturator nerve partially supplies both the hip

and knee joints. It is well for you to bear this in mind, otherwise you may seek the seat of trouble in the knee joint.

Notice the position this child assumes when we ask him to stand. He throws the burden of his weight on the left leg. His right foot is abnormally everted and the right glutes-femoral crease has disappeared. As he walks up and down the table you notice the limping gait.

We will now lay our patient upon his back. Always place such a patient upon a hard, level surface. I will presently show you the impossibility of making a thorough examination with the patient upon a bed or sofa.

As he is lying down you notice that the pelvis is tilted upward, and also that the right foot is everted more than is the left. As I take his legs and raise them to a right angle with the trunk his back, from the shoulders to the sacrum, is flat on the table as it should normally be. Observe this particularly in the lumbar region. At this point the apposition is so close that I cannot introduce a finger without using force. Now here comes an important point. If this boy's hip joints were healthy as I lower his legs to the table the lumbar region will remain in its present apposition to the table. If they are not healthy the pelvis will tilt, and between the lumbar region and the table there will be a variable space. This space may be quite imperceptible early in the disease, but a careful examination will usually disclose it. I now lower both legs and as I do so you notice the pelvis tilt, and as I get his legs on a straight line with the trunk I can easily pass my whole hand between his lumbar region and the table.

To determine which hip is diseased I again elevate the limbs to a right angle with the spine, and lower them one at a time. As I bring down the left leg the pelvis remains in normal apposition with the table; as I lower the right, the pelvis tilts, the space is easily discernable, hence we say that the affection is to be found in the right hip. The reason for this tilting is that the psoas and iliacus and other muscles about the joint stand guard, as it were, and working through the sympathetic system, lock the joint, thus preventing a movement that would subject the diseased tissues to tension and pressure and cause pain.

Notice also that as the patient lies on his back the angles formed by the intersection of a line drawn between the anterior, superior

ilial spines and the median line are not right angles as they are in a normal subject. The one-sided tilting of the pelvis causes this.

I now take this right leg and flex and abduct it, thus putting the ligaments about the joint on the stretch ; you see that the boy twitches with pain ; straightening the limb, I push directly upward on it and the same evidences of pain are manifest. Pressure directly over the joint also elicits pain. These movements do not cause pain when executed upon the left leg, thus proving that it is the right hip which is involved.

I now take the limb, and while making gentle traction upon it in its long axis in various directions, ask the boy to tell me in which direction traction gives him the most comfort. Having ascertained this we will place the boy in bed, and by means of a Buck's extension keep up a constant and uniform traction in this direction. The success of this plan of treatment depends upon obtaining a correct diagnosis of the disease.

Asheville, N. C., as a Health Resort.

BY H. E. WELCH, M. D., YOUNGSTOWN, O.

Read Before the Youngstown Academy of Medicine, March 20, '93.

During the past winter, I had occasion to pay a professional visit to Asheville, N. C. My stay was sufficiently prolonged to enable me to form a fair opinion as to the value of this climate in pulmonary diseases. I went there very skeptical as to the grounds for its wide reputation, but was fully convinced that it is a very good place for those suffering with this class of diseases.

Asheville is situated in western North Carolina, on a broad plateau lying between the Great Smoky Mountains on the west, and the Blue Ridge on the east. It is easily accessible by means of the Richmond & Danville Railroad. From the east, by way of Washington, and from the west by way of Cincinnati. The city has a population of about 12,000, and is well supplied with modern improvements, such as water works, sewers, electric cars, and lights, and paved streets. The hotels are numerous and very fair in all respects except as to prices, which are quite high ; ranging from \$3.00 per day upward. The boarding houses are very numerous ; a few are good, but the majority are such that a sick person with

a weak stomach would not care to live in. The rates are from \$9.00 to \$18.00 per week.

The surroundings of Asheville are very beautiful. In every direction can be seen the pine-covered spurs and peaks of the mountains. On a clear day, looking in a southeasterly direction, one can see the hills in Georgia and South Carolina, eighty miles away.

There are many beautiful drives and walks for those patients able to take that kind of exercise; and it is a noticeable fact that those who engage in this kind of recreation do best.

The natives have given to this country the name "Land of the Sky," or "Skyland," on account of the large number of sunshiny days. The following are the meteoric statistics for 1889; later were not obtainable, but they are a fair average:

Spring.....	mean temperature	54°
Summer..	"	71°
Autumn	"	55°
Winter.....	"	37°

Average number of clear and fair days in each month, $24\frac{5}{10}$. Average number of cloudy and rainy days, $5\frac{6}{10}$. There were only ten days in the year on which the sun did not shine. Average monthly rainfall, including melted snow, $3\frac{4}{10}$ in. Total rainfall, $37\frac{6.8}{10.0}$ in. Mean annual barometer, 30.17. Prevailing winds, N. N. W. There is no rainy season, the precipitation of moisture is distributed quite equally throughout the year. In a series of nine years the mercury did not rise above 90° in summer. The nights are always cool. In winter, it is seldom that a zero temperature is reached: but during the past winter the mercury fell to 9° below zero. The weather was exceptionally cold throughout all the Southern States.

To my mind the benefits to persons suffering with pulmonary diseases in this place are due to three causes. First, the large number of days in the year that the patient can be out; second, the equitable temperature; and third, the altitude. The city is 2,550 feet above tide water, high enough to accelerate breathing and aeration, thereby increasing the nutrition of the lung, and not so high as to cause hæmorrhages and exhaustion. The following table gives the ratio of deaths from consumption in various sections

of the United States. The figures indicate the number of deaths from consumption in a thousand deaths from all causes :

Northern New England.....	250
Minnesota and California.....	150
Kentucky and Tennessee.....	109
Western North Carolina.....	30

There, as at all other resorts for lung diseases, the earlier the patient goes, the better the chance for a permanent benefit. Yet quite frequently those persons who are unable longer to walk, may be greatly benefited by being wheeled to the open air for an hour or two each day.

Asheville, like all other resorts, does not cure every one, nor even benefit every one ; yet a large number of those who go there are apparently cured, and a large proportion are certainly benefited. I saw a number of persons who had gone there in various stages of the disease, who were apparently well ; but to my mind, it is a question whether there would not be a return of the disease should the person return to the cold, changeable climate of the north.

A large number of the business and professional men of the town are those who sought residence there on account of tubercular trouble.

The best way, perhaps, to show the value of the climate would be to give the history of a case. Mr. B. had tubercular affection of the cervical lymphatics, infiltration of both apices. He arrived in Asheville on January 24th, was sleeping and eating poorly, had night sweats, and expectorated a small amount of characteristic sputum. Afternoon temperature ranged from 90° to 102°. In three weeks' time he had gained five pounds in weight, slept and ate better, did not have the night sweats, and was gaining rapidly in strength. On March 13th, he had gained fifteen pounds in weight. The dullness over the apices had diminished, there was no afternoon fever, and less expectoration.

Such is the history of a large number of persons who frequent this resort. The cases of recovery are too numerous to be a mere chance.

The great drawback to the place is the expensive living. No one but a healthy person can afford to stay long enough to derive much benefit, and there are no chances for light employment, which a great many are able to perform.

A few Suggestions in Reference to the Treatment of Typhoid Fever.

BY E. C. REGISTER, M. D., CHARLOTTE, N. C.

In preparing this article I will only consider a few principles in the treatment of Typhoid Fever in which so great a difference of opinion exist among the leading members of the profession. The best means to reduce the high temperature, the proper use of the eliminatives and the value of so called specific remedies are the principal questions that are giving rise to so much discussion at the present time. The danger of a continued high temperature in typhoid fever has been thoroughly established. A glance at the statistics on this point show that when the temperature did not reach at any one time to 104° F. only nine per cent. died, that when it rose to or above 105° F., at any one time, fully one-half died, and Dr. Murchison believes that when the temperature reaches 106° F. as many as seventy-five per cent. die.

These figures are sufficient to convince us that a very important part of the treatment of this disease is to keep the temperature at a point where destructive metamorphosis is not likely to take place and the exhaustion of the heart not so apt to occur. This high temperature is due to certain toxic agents, and to combat this symptom one may use Antipyrine, Antifebrine, Phenacetine, Quinine, the cold pack, or the cold bath. Of the three drugs first named, the first two, although they reduce temperature effectively, are objectionable, being pronounced cardiac depressants. Phenacetine is less open to this objection and hence is the safest of the three, although not quite so effective as Antipyrine. Quinine is also not without many objectionable features. It has been used to reduce the high fever in this disease for fully three centuries, almost as long ago as we have any history of its treatment. There is no doubt that its use often hastens the appearance of very annoying and sometimes dangerous nervous symptoms, yet in a great many respects it possesses advantages over the above-named antipyretics, and now at a time when we have probably a greater number of enthusiastic admirers of the cold water treatment than at any time in many years, yet an overwhelming majority of the leading members of the profession believe quinine to be superior to it under almost all circumstances. It can certainly be used

when the cold bath is entirely impracticable, or I might say dangerous, for instance when there is great cardiac weakness, when perforation of the bowels has taken place or is likely to occur, and when we have to contend with that dangerous symptom or complication, hemorrhage from the bowels. It is also generally admitted that among children quinine as an antipyretic is far superior to any other drug or means that we have, and that the cold water treatment in this class of patients is considered very unsatisfactory or useless. We know no more about the value of the cold bath in the treatment of typhoid fever now than we did fifty years ago. It has had its few admirers ever since it was first used in the treatment of this disease, which is fully one hundred years ago. The same may be said of quinine, the only difference is that its value has been more extensively recognized and appreciated than any other one medicine. Therefore, in this instance the opinion or recorded experience of eminent observers of ten, twenty or thirty years ago should be considered of equal value to men of the same prominence at the present time. This being the case I will consider it proper to quote the opinions of a few men in which we all have confidence.

Dr. Liebermeister, a noted German author, says that he has observed over two thousand cold baths in typhoid fever patients, and in three hundred and eighty of those the temperature of the body was as high two hours after the bath as before, and sometimes higher. This is more than twenty per cent. of the cases. The Doctor further says: "The fact is, notwithstanding the high estimate that I place upon the cold water treatment, and my positive conviction that it would be wrong to treat a severe case of typhoid fever without the symptomatic abstraction of heat (unless there were complications that were present which forbade it), yet if I were forced to the unpleasant alternative of adopting only one or the other of these two remedies, cold water or quinine, I should in the majority of cases choose the latter."

Dr. Immerman, with a still greater experience, found in his investigations that the degree of the lowering of the temperature as well as the duration of the same, was much greater in the mild attacks than in the severe ones. That is in those cases where the baths were needed most, if at all, they were much less efficacious. He also found the average lowering of the temperature to be

greater during the fourth week than the second or third weeks. Hence he proves that when baths are most effective there is little or no use for them. One writer says they are most useful when they are useless. Page, one of the most enthusiastic writers on the cold water treatment of this country, says that they are very seldom practicable in private practice. Hutchinson, of Philadelphia, says he occasionally resorts to them in hospital practice where everything is favorable to their employment. There is no doubt in my mind that if we could use the cold bath with as little inconvenience on the part of the patient as it is for him to take quinine the bath would be equal or superior to quinine in its effects. But this is something that has never been accomplished, even in the best of our large city hospitals where they have every convenience, the annoyance to other patients, the confusion and noise in preparing the bath, with the mental and physical worry on the part of the patient, all these things combined are sufficient to keep a great many physicians, even in hospitals, from using the baths. In addition to the many objections to their use in hospitals, we in a town of this size, or physicians in the country, have to contend with additional objections, so that when we even find a case of typhoid fever that is in every way suited to take the baths, in nine cases out of ten we find it entirely impracticable on account of not having the suitable conveniences, with trained nurses, for it is very seldom that physicians in this part of the country, where their patients are usually scattered over a great deal of territory, have the time to visit them every two or three hours, or as often as it is necessary to use the baths. The instructions of most writers on this subject is for the physician himself to superintend the baths and not rely upon a nurse unless a professional.

It is seldom that I have much difficulty with the moderate use of quinine, assisted by frequent cold applications to the head, with a reasonable amount of sponging, to reduce the high temperature in this disease, and I believe, knowing what I do of the situation, wants and conveniences of the physicians of North Carolina, that it is seldom if ever our duty to carry the cold water treatment further than what I have already indicated. An idea has become thoroughly fixed in the minds of a great many physicians that it is necessary in a case of typhoid fever for the bowels to act at least once a day, that the diarrhœa that is usually present is nature's

method of eliminating the typhoid poison and that it is the physician's duty to assist nature in this particular, especially if the bowels are a little constipated. I have taken some interest in collecting the opinions of a great many physicians in North Carolina in regard to giving cathartics in this disease and I find that some of them have firm convictions that it is the best after the first few days of the fever if possible to establish constipation to that extent that the bowels act only once in ten or fifteen days. I have myself observed this degree of constipation, and the symptoms it produced did not lead me to believe that it was my duty to make any interference. Quite diverse views are held in regard to this question. I know of some physicians who would not hesitate to give a compound cathartic pill during the second or third week. While the profession would almost unanimously condemn such practice as this, the majority of my professional acquaintances and the leading writers on the subject favor the use of mild cathartics or enemas sufficient at least to produce one free movement from the bowels a day. This is not only their rule during the first week, but during the second and third weeks, and in case of a slight diarrhœa they make no interference, but rather regard it a favorable symptom. My own experience leads me to exercise the greatest caution in the administration of cathartics in any stage of this fever. I have never yet been able to observe any good effects from their use, and for the last few years I have only resorted to their use in severe cases of tympanitis, where the bowels had not acted for several days, and I have nearly always found that in these cases the seemingly good effects from them were soon followed by an uncontrollable diarrhœa with an increased tympanitis. I feel confident that I observed several years ago, when I was in the habit of giving cathartics in this disease, and when my experience had not led me to have such firm convictions on the subject, as many as three cases that I was specially interested in, and when I recommended cathartics that their use increased the local intestinal lesions and in each case I had to contend with hemorrhages, the causes of which I feel confident were to some extent increased by my plan of treatment. Besides the weakness that this plan of treatment produces, there is no doubt that peritonitis and perforation of the bowels are more liable to occur, and the only good that can possibly be accomplished or that has ever been claimed is the

probability that some of the typhoid poison that is in the alimentary canal may be removed.

In this connection Dr. Hutchinson, in Pepper's System of Medicine, thinks that it is well to observe the advice given by Baglivi two centuries ago, namely, to avoid under all circumstances the use of cathartics in this disease.

For the last few years I have made it a rule never to give a cathartic after I made a diagnosis of typhoid fever. I very often, in the beginning of the fever, when the case is not sufficiently well developed to make a diagnosis, give a few broken doses of calomel, which I think is good practice, especially in North Carolina, where we have to contend with a simple continued malarial fever, and very often a typho-malarial fever where an early diagnosis is not every time easily made, and where the free use of the mercurials are eminently proper. I never, if I can prevent it, allow a diarrhœa in this disease to establish itself, even to the extent where most writers consider it harmless. If in this complication the movements from the bowels exceed two in the day and night, I usually begin at once with a special treatment, the object of which is to arrest or hold in check the diarrhœa. To accomplish this I find opium is productive of the best results. I often combine it with salol not only on account of its surface effects, but because it is a powerful germicide. I have for a long time favored the use of some one of the so-called specific remedies in the treatment of typhoid fever, not because I believe any of them have the power to abort or shorten the length of the disease, but on account of the many unpleasant and sometimes dangerous symptoms that they relieve and do it far better than any other class of remedies that we have at our command. The therapeutic value of nitrate of silver, turpentine and the mineral acids in this disease were recognized many years before an intelligent reason could be given why they were beneficial. It is perfectly plain to us now that it is through their antiseptic properties. Several new and valuable additions have been made to this class of medicines in the past few years. Salol, naphthaline, chlorine water and thymol are all strongly endorsed by eminent observers. Of course it is never proper to resort to but one of these medicines at a time, and it is evident that the large number recommended is of itself sufficient to prove that no one is the most available in all instances.

While it is doubtful indeed whether any of the so-called antiseptics which have been recommended in typhoid fever can be given in a sufficient amount to disinfect the whole mass of the intestinal contents, I believe, however, that a degree of antiseptics can be obtained that will favorably effect the ulcerative condition of the intestines, and indeed there is a great deal of evidence that if antiseptic remedies are used early enough and in sufficient quantities the extent of the ulcerations are not near so great and the danger of hemorrhage and perforation of the bowels are in a marked degree lessened. Since I adopted this plan of treatment, which was about six years ago, I have not met with a single case of hemorrhage from the bowels.

In selecting one of the antiseptics my own decided preference is in favor of salol, which I give in every case from the first hour that the nature of the disease is suspected and continue it throughout the entire course of the case, unless symptoms arise which suggest another remedy of this class. I usually give five grains every four hours to an adult, in capsules. My own belief is that this remedy so administered is a safe and useful part of the treatment of this disease, and when begun early and continued judiciously it helps in a great degree to prevent the development of serious symptoms and intestinal complications. I believe that it is as effective as turpentine in the treatment of tympanitis, and especially where the cause of this symptom originates in the intestines and is not due to muscular weakness. Under the latter circumstance I have used strychnine to some advantage, but I usually find stimulants more effective.

While I never in the beginning of typhoid fever prescribe nitrate of silver, turpentine, or any of the mineral acids, I feel sure that in a great many cases they can be used to much advantage, and in certain conditions all of them possess superior properties. For instance, the value of turpentine where the tongue is dry, brown and with a tendency to sardis, no medicine will equal it in its effects. So with the mineral acids in thirst, and with nitrate of silver in certain bowel complications.

Hummel & Parmele, the wide-awake medical journal advertising attorneys of Philadelphia, announce that they are "moving," and will be at home June 1st, at 257 South Fourth Street.

Cholera : Its Prevention and Treatment.

Surgical Irrigation of the Intestines and Peroxide of Hydrogen (Medicinal)

BY ELMER LEE, A. M., M. D., CHICAGO, ILL.

A mass meeting of physicians for the consideration of the above subject was held at the Great Northern Hotel, Saturday evening, March 18, 1893, under the auspices of the Practitioners' Club of Chicago. There was a large attendance.

Dr. C. D. Wescott called the meeting to order at 8:20 p. m., and Dr. DeLaskie Miller was chosen chairman of the meeting in the absence of Dr. N. S. Davis.

Dr. Miller in his opening remarks, said : This is an unexpected honor to be called upon to fill the place of the gentleman who is unavoidably absent ; but as the chairman of this meeting is to be little more than a figurehead, I will accept the honor with thanks. This is an important meeting, and I trust that the attention and interest of it will be given to the gentlemen who will occupy the time. Without further remarks we will proceed to the business before the meeting.

After remarks made by several medical gentlemen on the different phases on the subject of cholera :

Dr. Elmer Lee, of Chicago, read the following paper :

The leading propositions suggested and tried in the treatment of Asiatic cholera during the epidemic of 1892 in Europe consisted of the following general plans. Early in the epidemic, lactic acid treatment was proposed on the ground that it would neutralize the alkaline accumulations in the bowels and so stop the multiplication of the baeilli.

An Englishman residing in Paris considered cholera a hyperæmia of the spinal cord. His proposition was ice poultices continuously applied to the region of the whole spinal column. A small pamphlet was published by the doctor in defense of his conclusions and to present testimonials in favor of his congestion-theory. As this system of management was not seriously considered by cholera physicians its efficacy cannot be stated.

The use of large doses of the Russian remedy, salol, the invention of Prof. Nenski, of St. Petersburg, grew in favor as a new remedy during the epidemic. The average result of cases so treated

in St. Petersburg, and by my American colleague, Blackstein, in Baku, and in other provinces in Southern Russia, could not be said to be satisfactory. Finally, at the last of the epidemic, its influences had come to be considered less and less valuable—this, however, can be said—it was in all and all more largely used than any other new remedy. Still it would not be safe to place too much trust in it.

Calomel was everywhere a remedy even more used than salol. Formerly this drug was used in very large doses, but last year it was the very small doses which found favor. Especially was this true in the treatment of cholera in Hamburg.

Of the surgical measures, the infusion of solutions of salt were most practiced. The solution consisted of distilled water in which was dissolved one-half of one per cent. of common salt. This liquid was warmed to the temperature of the blood and either introduced directly into some large vein or injected with a long needle and a large barrel syringe beneath the integument of the abdomen. The amount of salt solution used in either case would be from one pint to one quart each time. In one case treated at Hamburg as much as thirteen quarts of salt water were used from first to last. The patient recovered. The subcutaneous injections were frequently followed by cysts, and sometimes abscesses appeared. Intravenous injections sometimes proved a godsend, but more frequently disappointment could be said to be the result. These injections were only used in the third period of the disease or the stage of collapse, algidity or asphyxiation, at which period, it would be rather unreasonable to expect recovery by virtue of any treatment.

The Italian treatment, as it was called in Russia, was much used, and with frequent gratifying success. This practice was introduced by Prof. Cantani. It consists of a clyster composed of the following constituents :

Boiled water or infusion of chamomile, (warm) 2 litres.

Tannin, 5 to 10 grains.

Laudanum, 30 to 50 drops.

Powdered gum-arabic, 50 grains.

This or some part of the solution is occasionally passed into the rectum, to be retained if possible by the patient. In the experience of those who have followed this method of treatment almost every case taken at the beginning of the disease has lived. It is

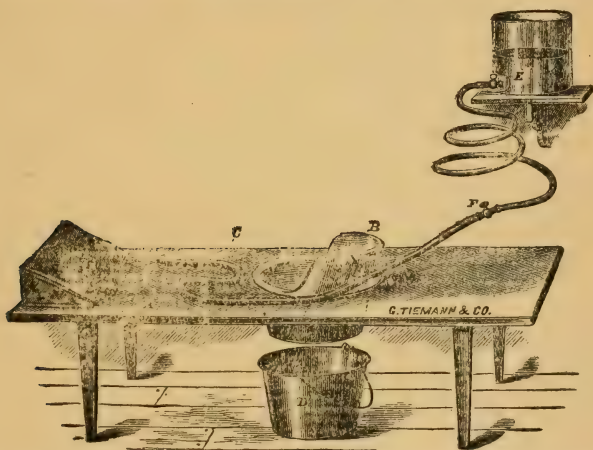
certainly more reasonable in principle than simple medical management.

Of the experiments of Ferran of Spain, and Haffkine of the Pasteur Institute, much has been said, but what has been said has failed to bring conviction to my mind. As cholera itself cannot be said to protect one who has had the disease and recovered, against a second attack, then that which is less than cholera in influence cannot be expected to do it. The seat of the disease is located in the intestines, and, so long as the infectious juices are there, the lymph vessels in the processes of physiological function will continue to infest the blood. Can we hope to thwart physiological action of absorbents by hypodermic injection of cholera culture, made at some time, it may be years previous to the date of the passing epidemic? The answer by my judgment is that such expectations are flimsy. The caprice of Stanhope at the Hamburg Hospital cannot seriously pass for an argument in favor of an anti-choleraic vaccination. His interesting but wildly exaggerated stories were the product of a newspaper's love for sensation, and profit of increased sales of newspapers.

My own personal thoughts concerning cholera and the method of treatment, as practiced by me both in Russia and at Hamburg during the epidemic of 1892, will occupy the remaining time allotted me.

It is now well known that cholera is a disease of the alimentary canal. Its inciting cause is believed to be a germ taken into that canal through the medium of food and drink. There its presence is protested against by the absorbent vessels, which eliminate from the food the nutriment for the body. The first symptom produced by foreign invasion in the intestines is a diarrhoea, which may precede vomiting from one to three or even four days. If this be true, the bowels must be the seat of the disorder, and the most direct method of reaching them by medication must be the best. If the stomach could be emptied of the foul material before the poison has passed further, there might be speedy relief and, indeed, no real cholera. After it has passed into the intestines, medicine administered through the stomach may be slow in reaching the seat of the disease, and even then can only mingle with the poison, holding out the hope that the one will be neutralized by the other. This hope, in truth, is seldom realized. But if the poison can be

removed from below, the course is left clear for nature to recuperate itself. The diarrhœa is an evidence of the great exertion put forth by the organism to rid itself of the death-dealing agency, and probably it would be effectual in the great majority of cases were it not that the nervous forces of the system are exhausted by the terrible strain before the required evacuation of the bowels is completed. A large irrigation of hot water, made soapy preferably by neutral liquid soap, introduced into the colon through a suitable rubber tube, is the simplest, and I am prepared to say further that it is a more satisfactory way of treating cholera than any other with which I am acquainted. The time to begin the irriga-



(Dr. Lee's apparatus for irrigating the intestines for the cure of cholera and other bowel diseases. Used first in St. Petersburg, during the cholera epidemic of 1892.)

tion is at the very earliest possible moment. Save the blood every single moment of infection by immediate action, even if there is the faintest suspicion of cholera either with or without diarrhœa. In every post-mortem seen by me of cases of death in which there had been no marked diarrhœa, the colon and small intestines were filled with accumulations of choleraic matter which swarmed with comma bacilli. The rule from which there need never be deviation is to treat the patient by irrigation of the bowels and rinsing of the stomach, without waiting for confirmation of the diagnosis either with the microscope or by the culture test. The best part of the practice is always to save the patient, even at the expense

of fine statistics. The accompanying illustration explains the manner of using irrigation of the intestines. Such apparatus is suitable for places of public treatment of the sick. In private practice the syringe would take the place of the irrigating apparatus. The exact model of the irrigating table used by me in St. Petersburg may be seen at Mr. Sargent's store on Wabash avenue.

For internal treatment my experience taught me that the *medicinal peroxide of hydrogen, of Marchand*, given in cupful doses of the strength of 4 per cent., or even much stronger, was a better antiseptic than any other drug heretofore known in the treatment of cholera. Then the treatment would be, first, immediate irrigations with hot water and soap, using from one to three gallons at a time twice a day for the first and second day. Once a day afterwards if required, which is seldom the case. At the same time cleanse the stomach with *medicinal peroxide of hydrogen* and hot water used freely—by urging the patient to drink. The feeding and nursing are the same as would be required by a patient suffering from septicæmia or other prostrating disease. My belief is based upon personal experiences and the following surgical measures and medical treatment, viz: Irrigation of the bowels, *always first* with hot water made soapy with neutral liquid soap or a good castile soap; second, cleansing and rinsing the stomach with hot water and *medicinal peroxide of hydrogen, of Marchand*, continuing till it is well washed; third, food and nursing; fourth, *medicinal peroxide of hydrogen of 4 per cent. strength* given in cupful doses at intervals of two hours during the sickness till convalescence; fifth, meet the requirements as they come up, as would be done in any other grave disease, using whatever personal experience has taught us to believe is good. Cleanse the bowels, wash the stomach, feed the sick, keep them warm if cold, and reduce excessive heat by the cool bath rather than reliance upon drugs; using anything in an emergency that is the easiest and the most accessible to procure. The cholera patient may be convalescent inside of the first few days, or if not convalescent and not dead, the case goes into the typhoid state, after which convalescence may be deferred for several weeks or death may be the conclusion. The temperature prior to the fifth day is generally abnormal or a little above, but on the fifth day marked exacerbation and elevation of temperature indicates the typhoid condition.

THE CHAIRMAN: It is a most fortunate circumstance that we are alive to-day. We must all of us feel confident that we have passed from the old to the new dispensation, which cannot but strengthen our faith like the anchor cast within the vale. We know what cholera is; we know that we can limit its spread in our city. This is great confidence, and it will do much for the comfort of this community. This idea should be spread throughout the length and breadth of this great city.

Notes.

Few physicians, who have practiced medicine five years, but have assured some patient relief, in the use of cod liver oil, only to see the patient sink lower and lower, from want of power to digest the remedy. Cod Liver Glycerine removes this difficulty; capable of being diluted with water, requires no digestion, but is a digestive stimulant. If you give Cod Liver Glycerine it will be assimilated. It combines readily in all prescriptions.

The Superintendent, and Surgeon in charge of St. Louis City Hospital, Dr. H. Marks, announces that Cod Liver Glycerine is now used in that institution. Its power to mix uniformly in any proportion, in all prescriptions, or to mix with water and spirits without separating on standing, renders it the most desirable reconstructive in the convalescent period of difficult surgical cases, or acute diseases attended with emaciation; while its digestive properties insures its therapeutic action. †

One on the Lawyer.

An old man was on the witness stand and was being cross examined by the lawyer.

"You say you are a doctor, sir?"

"Yes, sir; yes, sir."

"What kind of a doctor?"

"I make intments, sir; I make intments."

"What's your ointment good for?"

"It's good to rub on the head to strengthen the mind."

"What effect would it have if you were to rub some of it on my head?"

"None at all, sir; none at all. We must have something to start with."

SYR. HYPOPHOS. CO., FELLOWS

Containing the Essential Elements of the Animal Organization—Potash and Lime;

The Oxidising Agents—Iron and Manganese;

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And the Vitalizing Constituent—Phosphorus; the whole combined in the form of a Syrup with a Slightly Alkaline Reaction.

It Differs in its Effects from all Analogous Preparations; and it possesses the important properties of being pleasant to the taste, easily borne by the stomach, and harmless under prolonged use.

It has Gained a Wide Reputation, particularly in the treatment of Pulmonary Tuberculosis, Chronic Bronchitis, and other affections of the respiratory organs. It has also been employed with much success in various nervous and debilitating diseases.

Its Curative Power is largely attributable to its stimulant, tonic, and nutritive properties, by means of which the energy of the system is recruited.

Its Action is Prompt: it stimulates the appetite and the digestion, it promotes assimilation, and it enters directly into the circulation with the food products.

The prescribed dose produces a feeling of buoyancy, and removes depression and melancholy; *hence the preparation is of great value in the treatment of mental and nervous affections.* From the fact, also, that it exerts a double tonic influence, and produces a healthy flow of the secretions, its use is indicated in a wide range of diseases.

NOTICE -- CAUTION.

The success of Fellow's Syrup of Hypophosphites has tempted certain persons to offer imitations of it for sale. Mr. Fellows, who has examined samples of these, finds that no two of them are identical, and that all of them differ from the original in composition, in freedom from acid reaction, in susceptibility to the effects of oxygen when exposed to light or heat, in the property of retaining the strychnine in solution, and in the medicinal effects.

As these cheap and inefficient substitutes are frequently dispensed instead of the genuine preparation, physicians are earnestly requested, when prescribing the Syrup, to write "Syr. Hypophos. Fellows."

As a further precaution, it is advisable that the Syrup should be ordered in the original bottles; the distinguishing marks which the bottles (and the wrappers surrounding them) can then be examined, and the genuineness—or otherwise—of the contents thereby proved.

Medical Letters may be addressed to

Mr. FELLOWS, 48 Vesey Street, New York.

Charlotte Medical Journal.

E. C. REGISTER, M. D., J. C. MONTGOMERY, M. D.,

Editors and Publishers,

No. 36 SOUTH TRYON STREET,

CHARLOTTE, N. C.

✧ SUBSCRIPTION. \$2.50 PER YEAR. ✧

Articles intended for the Original Department of the Charlotte Medical Journal will be accepted only with the understanding that they are contributed to it exclusively.

THE Memphis Journal of Medical Sciences has laid itself down in its last sleep. Its editors have more profitable employment.

THREE large and commodious Hospitals are now being constructed in New York city, and soon a fourth will be commenced.

THERE is soon to be added to the many beauties and attractions that are now seen in Central Park, New York City, a huge bronze statue of J. Marion Sims. It is to be erected to his memory and the services he rendered humanity. Well does he deserve this tribute of respect, for there never lived but one Sims. He was without a peer. His reputation was known from continent to continent. He graduated from South Carolina College and practiced in that State several years before going to New York. He was founder of the Woman's Hospital of New York. At the age of 69 he died of heart disease.

DR. SIMON BARUCH, who has so ably edited the department of Hydrotherapy of the Journal of Balneology, will assume full editorship of that journal with June issue. The medical press will be pleased to note this change. Dr. Baruch's long career as a general practitioner and one of the most energetic writers on natural remedies, justly fits him to the chief editorship of the Journal of Balneology. He is a most enthusiastic admirer of the cold water treatment in typhoid fever, and he has been laboring and endeavoring, with no little success, to arouse the profession to become interested in treating diseases with natural remedies. We wish Dr. Baruch unlimited success in his high and responsible undertaking.

TO our list of advertisers we have the pleasure of adding the well known firm of the Rumford Chemical Works, of Providence, R. I. They are the manufacturers of the renowned Horsford's Acid Phosphate, which is no doubt one of the most popular and extensively used proprietary medicines in this country. Our experience with this preparation has been extensive and indeed satisfactory. We take a pleasure in recommending it to the profession.

WE hope our readers will find it to their interest to carefully read the announcement of the Chattanooga Medical College. Those composing the faculty are men of great ability and professors of the highest standing. It offers exceptionally fine clinical and laboratory facilities and practical anatomy in abundance. This school of medicine has always enjoyed a fine patronage, and with the new college building, large hospitals, with all the modern improvements, we predict and hope for it greater success and prosperity than ever before. For catalogue address Dr. E. A. Cobleigh, Chattanooga, Tenn.

DR. WITSON, of this city, who recently graduated from the University of Virginia, arrived home a few days ago. Out of a class of 148 only 28 were graduated. This is quite a compliment to Dr. Witson, and the people of Charlotte, as well as this journal, congratulate him upon his success. In a few weeks Dr. Witson will go to Chicago, where he will spend some time in the Post Graduate School of Medicine, and also take in the World's Fair. In due time he will take an extended tour abroad for several years. On his return he will locate in New York City. May success ever attend him.

THE people of Georgia are still crying for higher medical education. This is owing to the fact that they have never succeeded in establishing a State Medical Board. This seems strange, too; Georgia is a good State, she has good citizens, her capital claims to be the "Gate City of the South," and yet she has no medical law, only the old one of registration by diploma. At some colleges it is an easy matter to obtain a diploma, and with it you can practice medicine in Georgia. In North Carolina you cannot practice medicine unless you pass the State Board, regardless of

what school of medicine the stamp of your diploma bears, and it is due to the enforcement of this law, though not without fault, that has made the great advancement in the medical field in North Carolina. We sympathize with the people of our sister State and trust that a new era may dawn upon them and they may realize the fond hopes they now incessantly anticipate.

HONORS TO NORTH CAROLINA.

THIS season North Carolina shares other States in bearing off the honors from the leading institutions this side of the waters. The leader of the class of 186 at Yale is a young man from North Carolina, his home being at Hendersonville; it is expected that a North Carolina lad will bear away the first honors at West Point; and the highest honor that is given from one of the leading medical colleges at the great metropolis fell to the lot of a Fayetteville boy in the person of Archie McDuffie, who out of a class of 110 attained the highest grade at the final examination. The writer is personally acquainted with this young man, and to him this journal sends greetings and congratulations.

DEATH OF WILLIAM LOMAX, M. D.

THE Indiana Medical Journal gives a brief account of the life of William Lomax, with a well taken portrait. It may be of some interest to our readers of North Carolina to know that this physician who attained great success and has been crowned with many honors in the Northwest, was born in Guilford county, N. C., March 15th, 1813; died in Marion, Ind., April 23d, 1893. The following clipping is taken from the above journal:

"Not only the Commercial Club, but the city and State lose one of their most eminent citizens in the death of Dr. Wm. Lomax. In all the record of his long life there is naught to remember of him but usefulness and kindness. In public and private life he was the same unassuming and kindly gentleman. He was the friend of the poor and dependent and the unfortunate and suffering. In his skillful care all fared alike. His charity was unbounded. He speedily gained the confidence of the people and maintained it during the half century that he spent in active practice in this community. While in the army he was untiring in

his devotion in alleviating the sufferings of the soldiers, and often went forward into the battle where the dead and wounded were lying to attend more promptly to the calls made upon him."

"Full of years and full of honors he passed away."

THE COLLEGE OF PHYSICIANS AND SURGEONS, RICHMOND, VA.

A description of this new medical school has been fully given in the Practice, from the editorial pages of which we take the following :

This is the name of the new medical school which has just been chartered in this city. As we go to press the various committees, appointed to arrange the preliminaries incident to a formal announcement, are at work, and in a few days the organization will be completed.

Among the incorporators are some of the most influential commercial and professional gentlemen of Richmond, viz. : Major Lewis Ginter, Dr. Hunter McGuire, James B. Pace, Rev. Dr. Moses D. Hoge, Edgar D. Taylor, Dr. Joseph A. White, P. H. Mayo, Stephen Putney, Charles Watkins, Prof. Edmund Harrison, Hon. Beverly Munford, C. O'B. Cowardin, Joseph Bryan, E. A. Saunders, Sr., Frederick S. Myers, Thomas Atkinson, Hon. J. Taylor Ellyson, Thomas Potts, John Pope, A. S. Buford, Richard L. Brown, D. O. Davis and Thomas C. Williams, Jr.

The mere mention of the name of Dr. Hunter McGuire as the Chairman of the Faculty suggests at once the success of the enterprise. This is made more certain when we know that Dr. J. A. White, the well-known Ophthalmologist and Laryngologist, is Secretary.

Few, if any, of the Southern medical schools have placed themselves on as high a plain, both theoretically and clinically, as that which characterizes the schools of the North and Northwest ; and the demand for such institutions unquestionably exists. It is in response to this demand, and not in any spirit of antagonism to either of the two medical schools now in this State, that the College of Physicians and Surgeons, Richmond, Va., has been created. With such an institution our Southern students will no longer seek those high-grade advantages so far from home.

The chairs have been filled by men most admirably fitted for the

work assigned them, and they are unanimous in their avowed and unalterable determination to place this school on the highest possible plane, by providing for a three-years' graded course, and by equipping the institution with every modern appliance necessary to the accomplishment of this end.

The following is the Faculty with associate professors thus far announced :

Hunter McGuire, M. D., LL. D., Professor of Clinical Surgery and Chairman of the Faculty ; Hugh M. Taylor, M. D., Professor of Practice of Surgery ; Stuart McGuire, M. D., Professor of Principles of Surgery ; Landon B. Edwards, M. D., Professor of Practice of Medicine ; Thomas J. Moore, M. D., Professor of Clinical Medicine ; Isaiah H. White, M. D., Professor of Gynecology ; George Ross, M. D., Professor of Obstetrics ; J. F. Winn, M. D., Associate Professor of Obstetrics ; W. S. Gordon, M. D., Professor of Physiology ; J. Michaux, M. D., Professor of Materia Medica and Therapeutics ; Joseph A. White, M. D., and John Dunn, M. D., Professors of Ophthalmology, Otology and Laryngology ; Edward McGuire, M. D., Professor of Diseases of the Nervous System, and Associate Professor of Gynecology ; Charles H. Chalkley, M. D., Professor of Chemistry, Toxicology and Medical Jurisprudence ; Paulus A. Irving, M. D., Professor of Diseases of Children ; M. D. Hoge, M. D., Professor of Histology, Urinology and Pathology ; Lewis Wheat, M. D., Professor of Diseases of the Genito-Urinary Organs and Syphilis ; Virginius W. Harrison, M. D., Associate Professor of Diseases of the Genito-Urinary Organs and Syphilis ; W. T. Oppenheimer, M. D., Professor of Hygiene, State Medicine and Climatology.

The chair of Anatomy has not been filled as we go to press. The professor of this chair, the Demonstrator of Anatomy and the other associate professors will be announced as they are determined upon.

In addition to the Medical and Surgical, there will be a Dental Department, with Dr. Lewis M. Cowardin, at its head ; and a Department of Pharmacy, headed by Mr. T. Ashby Miller, a graduate of the Philadelphia College of Pharmacy, and the successful proprietor of the Broad-Street Pharmacy of this city.

The College of Physicians and Surgeons, Richmond, Va., has at its command, we are informed, all the pecuniary and clinical ad-

vantages needed to make the school "go" from the start; and when its doors are opened in the autumn, we feel sure of a very large class of Southern young men.

BOOKS REVIEWED.

PRACTICAL MEDICAL THERAPY, a Book for the Family, the Physician and the Druggist. A Popular Treatise on the Prevention and Cure of Diseases and the Use and Abuse of Medicines, etc. By JOSEPH A. CONWELL, M. D. Vineland, N. J.: The Conwell Publishing Company, 1892.

Books that have titles similar to the one above are frequently not of much value, if not worthless; but such is not the case with this one. The author has certainly prepared a useful book for the household. It is not written for the profession principally, but for the people, but if read by the profession they will heartily endorse its teachings. People who are situated at a distance from physicians will find that this book will be of great help to them in cases of emergency. Oftentimes physicians' services will not be needed for every little ailment. The chapter on charlatans I wish could be read by all. The book is divided into four parts. Part I. is devoted to Facts About Medicine. Part II. Diseases and Other Ailments. Part III. Medicines and Other Remedies. Part IV. Medicines and Remedial Compounds. It contains many formulæ that are useful and can be readily compounded at home. It is written in plain language, and contains 641 pages, with a good index. The descriptions of the various diseases are sufficiently thorough, and the directions for treatment judicious. Every household should have the book.

A SYSTEM OF OBSTETRICS, WITH 537 ILLUSTRATIONS; Based from Translations from the French of Auvard. Revised by CURTIS M. BEEBE, M. D.. Chicago, 1892. J. B. Flint & Co.

The past few years have been prolific in the productions of treatises on obstetrics, and the present magnificent volume is one among the number to meet the modern requirements. While many other books have been written on this subject, yet, judging from the character of this work, the clearness of style, the valuable and practical information it contains, the many and most excellent illustrations and drawings, really the book contains more illustrations to its size than any one we have yet received, and these add greatly in elucidating the text, the depth and thoroughness that is shown in its preparation, its authenticity, places this work on the

same elevated plane where others rank. The chapter on Presentations and Positions is certainly well written and one of the best I have yet seen. The illustrations are simply superb. This role in Obstetrics is considered the most difficult for the student to comprehend, but with the many beautiful illustrations and the lucidity of the text, places it clearly before the student's mind. The Symptomatology of Pregnancy forms another interesting chapter. All books, of course, discuss this chapter, but the author's arrangement, with the illustrations, the subject matter can be readily grasped. Under the chapter on Diagnosis of Pregnancy we will find a nice classification also, readily comprehended and clearly stated. The diseases of eclampsia, puerperal septicæmia and extra genital localized diseases have received careful attention and are presented in a forcible manner. There are two objections to the book—it has neither preface nor index. Every book should have a preface, as this generally lays out the plan of the work and gives the reader an insight as to its character. The book is well gotten up, either in cloth or sheep, at a reasonable price.

A HAND BOOK OF LOCAL THERAPEUTICS. By ALLEN, HARTE, HARLAN and VANHARLINGEN. Edited by HARRISON ALLEN, M. D. Octavo, 500 pages; price \$4.00. P. Blackiston Son & Co., Philadelphia.

The need for a book of this character has long been apparent, for there has been no text available in which the local action of drugs was not subordinated to their general actions, while the average text book omits altogether mention of many agents that, in the hands of a specialist, become valuable aids to cure. Diseases which require chiefly local treatment are those of the respiratory passages, Eye, Ear and Skin, together with certain general Surgical affections, including diseases of women; it is therefore to the great advantage of the work that each remedy has been thoroughly set forth by different authors who have had large practical experience in these various branches. Each remedy has been taken up in alphabetical order, and after a description of its pharmaceutical properties, is considered in reference to its physiological effect and value in local treatment. The demands for thorough revision of local medicaments made by the advance of theories of asepsis, have been fully considered, and a succinct account has been presented of the source and properties of the very numerous new agents which affect tissue locally. Some drugs have been

excluded which have been highly praised; on the other hand, great care has been taken not to indorse imperfectly attested novelties. This Hand Book embodies the results obtained by experienced teachers, and will prove a very valuable work to the general practitioner. Two carefully-made indexes make it a book of ready reference. It is well printed, neatly bound, and will be of service to physicians.

FLINT'S COMPLETE CONDENSED ENCYCLOPEDIA OF MEDICINE AND SURGERY. By Various Writers. Arranged Upon a New System, which Embodies the Methods of Treatment by Eminent Practitioners of Medicine. Compiled under the direction of the Publisher. Vol. I. and II. 1893. J. B. Flint & Co., New York.

The publisher of these volumes could not have selected the different subjects from men of greater ability or experience than those whom he has chosen: Drs. John Abercrombie, E. C. Beale, C. E. Beever, W. B. Hadden, G. E. Herman, Victor Horsley, Henry Juler, G. B. Keetly, Percy Kidd, Wm. Maccormac, Robt. McGuire, Angel Money, F. W. Mott, C. Mansell Maulline, H. M. Murray, A. T. Myers, I. Owen, A. J. Pepper, J. J. Pringle, G. T. Revington, F. T. Roberts, R. Sandby, C. E. Shelly, W. E. Stevenson, J. B. Sulton, B. F. Underwood, Dawson Williams, and others. The compilation of the writings of these men into book form makes these volumes of the greatest value. The possession of these volumes gives the purchaser in a concise, complete and eminently practical form the science and art of medicine, as understood and practiced by representative members of the medical profession. In the preparation of this work particular attention has been given to the treatment of disease. Each section on treatment, as will be noticed, is exceptionally complete, the exact doses and combinations of the various drugs recommended in nearly every case being given. While the treatment has had careful attention, symptomatology has not been neglected in the least. Differing from other works, it contains full description of the diseases peculiar to women, diseases of the eye and ear, diseases of children, as well as lucid descriptions of the more common and more important surgical operations. The heading of each article is given in large, clear type, with the author's name below. These books are gotten up in first-class style, substantially bound, showing that they are books for constant use and not for the shelf. The two volumes contain 1555 pages, and for books of reference and use I know of none

better. It gives me great pleasure to recommend these books as being thorough and complete.

INTERNATIONAL CLINICS; A QUARTERLY OF CLINICAL LECTURES ON MEDICINE, NEUROLOGY, PEDIATRICS, SURGERY, ETC., ETC. By Professors and Lecturers in the Leading Medical Colleges of the United States, Great Britain and Canada. Edited by JOHN M. KEATING, M. D., LL. D., Colorado Springs, Colorado; JUDSON DELAND, M. D., Philadelphia; J. MITCHELL BRUCE, M. D., F. R. C. P., London, Eng.; DAVID W. FINLAY, M. D., F. R. C. P., Aberdeen, Scotland. Vol. IV. Second Series. Vol. I. Third Series. 1893. Philadelphia: J. B. Lippincott Co. 1893. Cloth 8vo. Pp. 387. Price \$2.75 each.

Some months ago we gave our readers a full description of the first three volumes of the second series. Now Vol. IV of this same series, and Vol. I. of third series lies on our review table. While the first three volumes are certainly excellent and useful books, the two volumes before us equal in merit any of their predecessors. Each volume contains fifty-one lectures, each lecture bearing the impress of the most careful preparation by the author. Under many chapters illustrations are given, thereby elucidating the text greatly. These lectures express the thought on nearly all subjects of the most learned men of our day, and such wisdom and knowledge compiled into book form, their value to the profession cannot be estimated. Vol. IV has been very carefully prepared and well written, and contains a handsome portrait of the late Prof. Henry Ingersoll Bowditch. It also contains a general index to the annual series, thus greatly aiding speedy reference to subjects. These books will be of great value to practitioners, general and special, and he who acts wisely, lays up for the rainy day, at once remits \$11.00 for the four quarterly issues. As to the mechanical part of these books, it is useless for me to comment; they speak for themselves.

A SYSTEM OF GYNÆCOLOGY, with three hundred and fifty-nine illustrations; based upon a translation from the French of Samuel Pozzi—Revised by CURTIS M. BEEBE, M. D., Chicago, Ill., 1892. J. B. FLINT & Co., New York, Cloth or Sheep.

This work includes the results of many years experience of the author, and represents the actual state of gynæcological science and art as it is understood and taught to-day. The fame of the author as a gynæcologist is widely known, and few have had the opportunity to gather the clinical experience from fields so varied and green as he, and rarely is a book so complete or gives more general satisfaction to the profession as does the present one. During the past twenty years the field of gynæcology has grown

brighter and brighter and the fruits reaped from the harvest have been marvelous. Many years ago the results of labor, the lacerated pirineum, the displacements, etc., were left to the general practitioner, and the palliative and expectant plan of treatment were all that could be resorted to, but now these ills are readily combatted by the gynæcologist. There can be no doubt that the great stimulus given, which has caused such an advancement in gynæcology is the revolution that has taken place in antisepsis, this being the case the author opens this most excellent work with antisepsis in Gynæcology. No chapter is more important and none more carefully prepared or none more instructive to read. All diseases that occur from a gynæcological standpoint are elaborately described in this work. Much space and attention has been given by the author to the great subject of Fibroid Tumors, especial attention being given as to their treatment, the different, most popular and best procedures for their removal. The displacements are also tersely treated, as well as the diseases of the uterus and its appendages. One of the marked features of the work is that the author has dwelt especially on the recent operations, giving them in detail, clearly and concisely, which have been often incompletely reported and somewhat obscuredly described in other works. The book contains 604 pages. The illustrations are numerous, many of which are original and most skillfully presented. The preparation of the book cannot be excelled. Typographically it is beautiful and the publishers are to be congratulated upon its handsome appearance.

THE NORTH CAROLINA PHARMACEUTICAL ASSOCIATION.

INVITATIONS are out announcing that the fourteenth annual meeting of the North Carolina Pharmaceutical Association, which was to have been held at Winston, was by the local committee changed to Greensboro on account of the burning of the Zinzendorf Hotel of that city, and will be held August 9th and 10th.

The Lacto-Preparata of Reed & Carnrick, as its name implies, is a substitute for milk, being prepared after the most approved scientific method. As a food for infants it has met with unequalled success and has given marked satisfaction to mothers who have fed their infants upon it.

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An Attack on the Morality of Chattanooga Physicians.

The Rev. Dr. J. P. McFerrin, of Chattanooga, Tenn., has created a decided sensation in medical circles in that city. During his sermon, in referring to the immorality existing in the city, the "Rev." said that "most physicians' offices in that city were regular places of assignation. That no matter what illness or complaint befell women, it was only when death was imminent that a male physician should be permitted to examine them, and then in the presence of some other member of the family." The Chattanooga Medical Society has called a special meeting to take action in the matter, says a cotemporary. The good and truly holy "Rev." should consider the failings of his own cloth before animadverting upon those of physicians.

CHATTANOOGA, TENN., June 14, 1893.

DRS. REGISTER & MONTGOMERY, Charlotte, N. C. :

Gentlemen—Having noticed the attached clipping in your journal of so recent a date as June 1, I wish to deny the statement therein contained and correct its data.

The alleged episode firstly is so old as to have "moss on it." It happened about the last of April last. Secondly, Dr. McFerrin is one of the ablest, best known and most popular (and sensible) ministers in this city. Third, the words used were in a general way, and had no direct reference to the local fraternity more than the profession as a whole. He was thoroughly misunderstood and his language misconstrued by some of those few physicians present, on the spur of the moment. On being informed of the "tempest in a tea-pot" which his sermon had produced (with a very few of his medical hearers), he was astonished, disclaimed the intention attributed to him, and was publicly corrected in the daily press at his own instance. Three or four local physicians were angry—out of a hundred doctors living in this city—and *wanted* to call an immediate meeting of the local medical society and pass condemnatory resolutions *ex parte* as to the offending minister, but were finally convinced of their folly by cooler heads, and when the regular meeting happened a few days later the subject was not even mentioned by any one present. According to my best information, Dr. McFerrin, in a sermon to men only, merely stigmatized *those* physicians whose morality is below par and opportunity for license

vastly increased by their professional work, as scoundrels and libertines, and he disclaimed against indiscriminate examinations of women on slight pretexts, advising that it should be reserved for cases undoubtedly requiring it, as its free exercise tended to laxity of morals and loss of due feminine modesty. Unfortunately, the profession *does* contain—always has and always will—just such unworthy men as he mentioned and as he admitted could be also found in the churches and ministry. And these bring unmerited disrepute upon the honorable practitioners who despise them along with the laity.

Lastly, Dr. McFerrin is not interested specially in me nor I in him, and I do not even belong to his church; but this statement is due him for the truth's sake, and shortly after this episode the same Dr. McFerrin (previously invited) delivered the annual address before the graduating class of the Chattanooga Medical College, and uttered some of the finest sentiments toward the medical profession as a whole, couched in the most chaste and beautiful language, that it has ever been my privilege to hear. The alleged happening above mentioned was a matter of only a day or two here and then sank into oblivion utterly and of itself, being too puerile for further attention. No one was hurt, no insult intended, and none taken except by a misunderstanding soon corrected, and the whole forgotten till I saw it referred to in your latest issue.

Yours,

FAIRPLAY, M. D.

[The above clipping was printed simply as news, copied from another periodical. We are always ready and glad to correct any error that occurs in our journal. If our friend will forgive us, we would like to inform him that "moss" does not grow as rapidly here as in his fertile region. Everything that is seen in a monthly journal is not expected to be particularly fresh.—ED.]

The Chicago Polyclinic at a recent meeting of the Faculty elected Dr. Otto L. Schmidt Professor of Internal Medicine; Dr. A. P. Ohlmacher Professor of Pathology and Bacteriology; and Dr. W. H. Wilder Professor of Diseases of the Eye.

First Boy: "No, sir, you don't catch me shamming off sick to stay home from school and get dosed up with castor oil and such stuff." Second Boy: "Oh, I'm all right on that. We're homœopaths at our house."—*Life*.

Selections.

A Case of Syphilitic Rupia—Remarkable and Rapid Result of Treatment.

By JOSEPH L. BAUER, M. D., Consulting Surgeon to the St. Louis City and Female Hospitals, late Professor of Genito-Urinary Surgery, etc.

In presenting what I consider to be an interesting clinical report, I cannot detail something novel with reference to the pathology or symptomatology of this rare, and one of the latest manifestations of the secondary period, so-called, of syphilitic infection; but I do contend that in reaching an excellent therapeutic result by the use of a proprietary medicine, I should do justice to the manufacturer by giving it publicity, believing that a similar result would possibly not have occurred had I relied solely upon the conventional remedies applicable to such cases.

Like the pustular syphilide generally, the presence of rupia "casts a mournful shadow upon the condition of the patient," and justifies the fear that purulent metamorphosis of syphilitic foci in other localities may be apprehended, besides being an index of the vitiated condition of the individual.

The case in question concerns a young German, aged 27, a bar-keeper, who presented the initial sclerosis in the usual locality three years ago.

After the usual period of incubation, the first manifestation of the disease was an unusually marked roseola, covering his entire body, but most pronounced on his face. In order to relieve him as rapidly as possible of the tell-tale evidences of this constitutional materia peccans, I prescribed one-eighth of a grain of bichloride of mercury every four hours, and directed the application of an ointment as follows :

R Oleate of mercury 5%.....	3 ss.
Lanoline.....	3 ss.

M,

To be rubbed on his face night and morning, until every vestige of the irritation disappeared. As is customary after this treatment, two days sufficed for the prompt elimination of all external appearance of the disease.

I then checked the internal administration of the bichloride, and commenced the inunction treatment, continuing this, with two hot

baths per week, for a period of three months; the administration of tincture of iodine was then begun, and continued for two weeks, when the mercurial inunction was resumed. Excepting the appearance of a few mucous patches, nothing occurring for a year and a half to mar the constitutional condition of the patient.

The absence of induration of the palpable, lymphatic glands led me to believe that recovery had asserted itself.

I did not see the patient for a year and a half, when five weeks ago he presented himself at my office for further treatment. With the exception of marked anæmia, indurated post-pre-cervical and epi-trochlear lymphatic glands, two corporeal and two cephalic, rupial, oyster-shell crusts were the only manifestations of the infection that could be determined. The latter, indeed, were typical in character: the one situated on the upper, inner surface of the thigh; the second, on the arm corresponding to the insertion of the deltoid muscle. These were as large as a silver dollar. The ones on the scalp were much smaller, though not without sufficiently distinctive marks to differentiate them from ecthymatous ulcerations.

Experiences gained in the treatment of all the various cutaneous manifestations of syphilis have taught me that in whatever stage of the disease the patient presents himself, a combination of internal treatment with the local application of an ointment containing the oleate of mercury has been fruitful of the very best results. The usual plan of treatment followed in cases of this kind would naturally be the internal administration of tonics, particularly those of the iodine group, or, if the anæmia were not too marked, to combine the treatment with large and progressive doses of iodide of potassium.

Having recently read a very strong recommendation, presented in a clinical lecture delivered by Prof. Germain See before the Academy of Medicine of Paris, that the halogen or lime salts possessed more intense and favorable therapeutic properties than the potash salts, and having in their favor the fact that they can be given with less disturbance to digestion, I was determined to give this recommendation a trial.

The Elixir Iodo-Bromide of Calcium Comp. (The Tilden Company) contains the Iodide of Calcium, besides some vegetable properties which are tonic in their character, and I naturally accepted

this preparation as the most available at the time. So that my treatment consisted of prescribing ten per cent. oleate of mercury in lanoline, as an external application to the rupial sores, and the internal administration of the elix. iodo-bromide in teaspoonful doses four times a day, suggesting to the patient that at each dose upon each day he should increase the quantity fifteen drops. Mark my surprise, when within one week and a half the entire rupial elevations had disappeared, leaving the characteristic reddened base as a reminder of its previous existence.

I present this report to the profession with the full knowledge of my responsibility, and I feel satisfied that the excellent result achieved warrants a recommendation of the product used in this case.—*St. Louis Medical and Surgical Register*.

American vs. Foreign Pharmaceutical Articles.

Inconsistency is probably the most common failing of mankind. We find a lot of doctors who are unwilling to use an American proprietary article, such as advertised in the medical journals; yet doctors and medical journals take up foreign articles, even when the formula is *secret* and *patented*, and use them.

Why can't an American pharmacist make as good a thing as a German, for instance? Further, the former doesn't talk about a trade mark and *conceal his formula*.

This country is getting old enough to let go the leading strings and lead itself. If you can get a good non-secret preparation in America, what on earth is the use of importing some patented article from abroad? Be consistent.—*Atlanta Med. and Surg. Journal*, May, 1893.

Sanmetto in Prostatic Disease—Vesical Catarrh—Spermatorrhea—Pre-Senility.

I have been using *Sanmetto* for two years quite extensively, and I am free to say with unvarying good results. It is the most satisfactory agent I have ever tried in prostatic disease and vesical catarrh. I have had excellent results with *Sanmetto* in spermatorrhea and premature decline of the sexual power. It is certainly a valuable addition to a physician's armamentarium.

Osceola, Iowa.

J. W. HOLLAND, M. D.

Substitutions.

Owing to the fact that several well-known and supposedly reputable houses have been deceiving the profession by filling orders for Elixir Iodo Bromide Calcium Comp. with a bastard preparation labeled correctly or with a modification of the name, we beg to inform the medical profession that we have decided to discontinue putting up the Elixir Iodo Bromide Calcium Comp. in 5 pt. bottles. We will now offer it for sale in pint bottles *only*.

We trust, therefore, that our friends will, in the future, when in need of Elixir Iodo Bromide Calcium Comp., refuse to accept the preparation offered unless the label bears our name, the correct name of the preparation and the container is a pint bottle. The Elixir Iodo Bromide Calcium Comp. is prepared only by The Tilden Company, of New Lebanon, N. Y., and St. Louis, Mo. All physicians are earnestly requested to specify "Tilden's" when ordering. None other are genuine.

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HARRY B. STONE, M. D.

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Painful and scanty menstruation.
Where the womb is extremely irritable and neuralgic.

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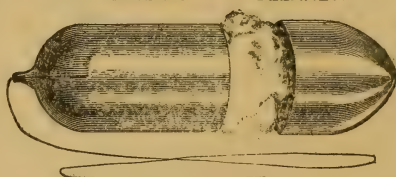
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Respectfully,

A. J. HOWE, M. D.

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Have you seen our "Ruby Capsule" for disguising the physical appearance of prescriptions, and for use when two medicines are to be taken in alternation? Send 10c. for trial box of 100.

The Punishment of Habitual Criminals.

Society has always been troubled in its disposition of criminals. When there were no jails, these were either set free, placed in slavery, or killed. In the first instance they usually returned to their old ways ; in the second, not a few escaped or were pardoned; and in the third, a mistake in the person was sometimes made.

Not a few thinkers have recommended the castration of the habitual criminal. In the Virginia Medical Monthly Dr. G. Frank Lydston says : "This method of punishment leaves behind it evidences which will prove a wholesome warning to criminals of like propensities. It prevents the criminal from perpetuating his kind. The murderer is likely to lose much of his savageness ; the violator loses not only the desire, but the capacity, for a repetition of his crime, if the operation be supplemented by penile mutilation according to the Oriental method. A few emasculated negroes scattered around the thickly settled negro communities of the South would really prove the conservation of energy, as far as the repression of sexual crimes is concerned. Executed, they would be forgotten ; castrated and free, they would be a constant warning and ever-present admonition to others of their race. Thus castration is a rational method of dealing with many phases of the crime question."

Herdsmen castrate such males as they regard as unsuitable for propagating the best samples of their species. Horsemen castrate horses designed for common use, in order that they may be more docile. Oriental monarchs castrate such of their subjects as they design to bring into close relation with their harems. If all habitual criminals were dealt with in this manner, the subjects of this punishment would be much like the rat with a bell fast to his tail, running among his fellows. He would advertise the fact of his crime and of its punishment, two things very generally forgotten by all parties. He would not people the earth with his corrupt blood. The extinction of some of the worst breeding classes would give the better a chance to occupy a larger portion of the earth.

In Michigan an effort has just been made to restore the death penalty for murder. If in place of this it were ordered that the convicted individual should be castrated, and then confined as at present, it is more than probable that the progress of this habit of killing people would be checked.—*American Lancet*.

Cod-Liver Glycerine.

Dr. J. P. Thomas, of Hopkinsville, Ky., says: For ten years I have not prescribed cod liver oil, on account of its deleterious effect upon the gastric mucus membrane—producing many cases of indigestion, and when taken for a long period, permanent dyspepsia. I found it would decompose and become rancid after being taken into some stomachs too weak to digest it quickly.

When the emulsions were put upon the market, I again had recourse to cod liver oil in its new dress—for its known tissue-building properties, but alas! I soon found, as far as correcting the decomposing tendency of the oil was concerned, the various emulsions were only a “delusion and a snare” to catch the unwary prescriber. The soda, acacia, etc., with which they are prepared, or emulsified, do not render aseptic the rancid bearing germs of animal decomposition; and though somewhat modified, these compounds of cod liver oil are still very nauseating and full of ptomaines, as is all decomposed animal matter. Besides I have found the various emulsions of cod liver oil unmiscible with other medicines—incompatible with any but oleaginous adena; consequently, I had ceased to prescribe any form of cod liver oil, until I found the product known as Cod Liver Glycerine. I am very much pleased with its ready miscibility with almost any fluid I desire to combine with it. I am satisfied, also, with its stomachic effect; not only easily digested, but as claimed, a promoter of digestion. It mixes readily with liquids, and produces no soponacious mixtures. As a vehicle for other reconstructive tonics, or alone, it is very valuable and useful to the practitioner. From the results obtained I am pleased with its therapeutic effects. It seems to require no digestion, but is assimilated promptly by simple absorption; and in tuberculous troubles of both lung and bone tissue, this property is very desirable.—*St. Louis Medical Review.*

Fellows' Hypophosphites is one of the standard remedies which have been before the medical profession for a generation. Its efficacy has never suffered any impairment and it is as popular to-day as ever, its use being more widespread than ever.

In emergencies, a properly selected pocket medicine case like that of H. K. Mulford's proves of enormous value to physicians.

SALO-SEDATUS

(OPPOSED TO FEVER AND PAIN.)

SALO-SEDATUS is a powerful Antiseptic, Antipyretic, Diuretic and Anodyne. It neutralizes septic poisons, and opposes septic conditions. It rapidly reduces body temperature when above the normal standard, promptly relieves pain, and induces refreshing sleep. It never distresses the stomach nor disturbs the bowels. While it quiets excitement in all parts of the system, it promotes secretion and favors excretion from every direction.

SALO-SEDATUS is a reliable remedy in the treatment of Erysipelas, Puerperal Fever, Typhoid Fever, Dysentery, Scarlet Fever, Whooping Cough, Measles, Small-pox, Malarial Fevers, Rheumatism, Neuralgia, Dysmenorrhea, Cystitis, Metritis, Peritonitis, Ovaritis, Headache, La Grippe, and all diseases accompanied with fever or pain. It is an excellent remedy to use in connection with quinine, when quinine is indicated, or to prepare a patient for the kindly action of quinine.

SALO-SEDATUS is an invaluable remedy in the treatment of children's diseases. There is nothing like it to relieve the pain and hush the cries of colicky children. In the treatment of children where high fever is suffered, it quickly lowers the temperature, quiets nervous excitement, and prevents congestion of the brain and convulsions. It is the fever and pain remedy for children, and it is perfectly safe.

SALO-SEDATUS is free from the narcotic and depressing effects upon the nervous energies which so often accompany and follow the use of Antipyrine, Veratrum, Chloral, Morphine and kindred drugs. It is vastly superior and preferable to all remedies of its class, and is rapidly superseding all others where it is known. It requires a fair trial only to establish its merits as THE antiseptic, antizymotic, fever and pain remedy. Once familiar with its prompt and reliable action, its convenience and wide range of usefulness, no physician will practice without using or prescribing it.

Send for Pamphlet and Free Sample.

Address **SALO-SEDATUS CHEMICAL COMPANY,**
ST. LOUIS, MO.

Use Standard Preparations.

We often read the report of a physician highly recommending a given remedy in certain pathological conditions. Another doctor is, thereby, induced to try the remedy and reports that, in his hands, it has failed signally.

Now, what is the explanation of this difference? Simply that the first doctor used a standard preparation—one whose maker's reputation and livelihood depend upon its excellence—while the other has obtained a medicine prepared from inert and worthless drugs.

It is well to bear in mind that the physician's reputation, and often the lives of his patient, hang in the balance.

A Valuable Therapeutic Agent.

The Elixir Six Iodides (Walker-Green's) ranks as one of the most valuable preparations we have for the treatment of skin diseases. Many physicians prescribe it with great satisfaction where they desire tonic and alterative effects.

Neuralgia.

Neuralgia, or neural hyperæsthesia, is the generic name for a number of diseases of which the chief symptom is pain following the course of a nerve or group of nerves and generally fixing itself where the nerve emerges from a forearm or at a superficial point just before it dips into a fascia. This designation is indefinite and leaves room for many central lesions to be classed as neuralgia, which have an entirely different pathology, and consequently require different treatment. No pain that is due to a disease of the brain or spinal cord should be called neuralgia, but that alone which is limited to a nerve in some part of its course. It is most commonly located in one of the branches of the fifth pair, oftener in the opthalmic division, when we have that condition generally known as hemicrania. This form is usually intermittent or periodic, coming on in the morning and subsiding at nightfall. The stomach is often nauseated and this reflex manifestation, especially in females, gives it the name of "sick headache," which is one of the most troublesome affections the physician has to encounter. When that part of the face from the lower eyelid to the mouth, including the side of the nose, cheek and upper jaw is involved, we have the lesion seated in the superior maxillary division. When the lower jaw is involved, the disease is in the inferior maxillary division. When the neck and back part of the head are the seat of pain, the first four cervical nerves are involved. This form is not so acute or painful as that of the fifth pair.

When the neck and shoulder are the pathological points, the disease is seated in the brachial plexus of the lower five cervical and first dorsal nerves. This variety generally follows exposure to cold, traumatism or a rheumatic diathesis. The intercostal nerves may also be affected, when we have intercostal neuralgia or pleurodynia. If the pain is in the back, we have involvement of the dorsal nerves; this is sometimes thought to be muscular rheumatism. If we have the lumbar plexus as the seat of pain, what is termed "lumbago" is the result. The sciatic nerve may be effected, when we have either a neuritis or a functional neurosis. It is called "sciatica" and generally is accompanied by a history of rheumatism or gout, and is often a very stubborn disease. Coccydynia or neuralgia of the coccyx and pododynia neuralgia of the

heel, are also varieties of this disease that often occasion the physician endless trouble. Before we undertake the treatment of this disease, it is vitally important to know as much as we can of its etiology and complications. The success of our treatment depends largely upon our knowledge of the morbid processes in operation and neuro-pathological conditions transmitted by the parent to the offspring, as well as the quality of the blood and nutrition of the body. With an inherited tendency to neuralgia, followed by anæmia, depressed vitality of the system, and exposure, especially to malarial influences, it is very easy to establish the disease on an enduring basis, but by removing or counteracting these factors, followed by proper medical treatment, the patient may generally be restored to health. If the cause is malarial or syphilitic and the disease is of an intermittent type, it yields more readily to treatment, but when these causes do not operate and the patient is advanced in years, the prognosis is not so favorable. Often in neuro-pathic families, when there is an enfeebled nervous system, the least exciting cause will develop neuralgia, and to prevent such results, the nutritive processes must be supported until the nerves, blood, and every organ are restored to the healthiest, normal condition, very often when this is done specific treatment is not necessary, as the pain vanishes as suddenly as it appeared.

We have found, in the majority of simple cases of neuralgia, large doses of subcarbonate of iron, 30 to 40 grains, three times a day, continued for a considerable time, will do more than any other single remedy towards conquering this stubborn malady. If there is a malarial cachexia, this preparation of iron added to quinine and one of the coal tar derivatives, for example "Antipuralgos"—a thoroughly scientific chemical compound of uniform and safe action, prepared by the "Katharmon Chemical Company" under a published formula—in our hands has been followed by the most satisfactory results, the indications fulfilled by this combination, are, improvement of the blood by iron, the tonic and antiperiodic action of the quinine and the analgesic effect of the "antipuralgos" allaying the excessive hyperæsthesia of the nerve, and besides, we have all the antiseptic and germicidal properties of the tar derivative, which are valuable in the treatment of all diseases that either originate in germs or are influenced by them. There are other preparations of coal tar derivatives, which we have

tried and found good and have also been recommended, but some of them are dangerous from want of uniform action and should not be used except under the eye of the physician. Our experience of "antipuralgos" can be better presented to our readers by a report of its effects recently in two cases, 1st, that of an elderly lady, 2d, middle-aged man.

Mrs. W., aged 50 years, called at our office March 15th, complaining of excruciating pain in half of the head, with malarial accompaniments. We prescribed quinine 3 ss.; ferri subcarb 3 i; morphine sulph. grs. ii, to be made into 12 capsules, and one capsule to be taken every two hours till relieved. March 18th, she called again; was not suffering from pain, but in an unfavorable state, nervous and feeble. We prescribed the same as before with the exception of the morphine, substituting "antipuralgos" in 5 gr. doses. March 21st called again, was free from pain and otherwise remarkably improved. We advised the same medicine to be continued three times a day for another week. She shortly afterward went South, and the other day we received a letter from her requesting us to send her the prescription for the last medicine, as she wished to have a supply in case of a return of the trouble, saying it acted more satisfactorily than any medicine she had ever taken for her neuralgia, but warning us not by mistake to send her the prescription for the first medicine, as that had nearly driven her crazy.

2d Case.—Mr. C. called at office, April 10th, complaining of severe pain in upper teeth, jaw and malar bone. History pointed to malarial cause. We prescribed quinine 3 i. Ferri subcarb 3 i, antipyrine 3 i, to be made into 20 capsules, of which one was to be taken every two hours till relieved. April 14th, patient called again, somewhat relieved, but weak and nervous. We substituted "antipuralgos" in place of antipyrine in 5 gr. doses, and advised an interval of three hours between doses. He called April 20th, and said he merely called to request us not to forget to give him the same prescription as the *last* in case of a return of the trouble. We have found in some cases "antipuralgos" uncombined with other remedies, answers the purpose well, and sometimes we have used it in connection with strychnine, phosphorus and iron, or other agents indicated at the time. Any line of treatment adopted must be pursued until there is no longer a symptom of the disease or even a trace of the neuralgic habit left.—*St. Louis Med. Era.*

THE BEST ANTISEPTIC
FOR BOTH INTERNAL AND EXTERNAL USE.

LISTERINE.

Non-Toxic, Non-Irritant, Non-Escharotic—Absolutely Safe, Agreeable and Convenient.

FORMULA.—LISTERINE is the essential antiseptic constituent of Thyme, Eucalyptus, Baptisia, Gaultheria and Mentha Arvensis, in combination. Each fluid drachm also contains two grains of refined and purified Benzo-boric Acid.

DOSE.—Internally: One teaspoonful three or more times a day (as indicated), either full strength, or diluted, as necessary for varied conditions.

LISTERINE is a well-proven antiseptic agent—an antizymotic—especially useful in the management of catarrhal conditions of the mucous membrane, adapted to internal use and to make and maintain surgical cleanliness—asepsis—in the treatment of all parts of the human body, whether by spray, injection, irrigation, atomization, inhalation, or simple local application, and therefore characterized by its particular adaptability to the field of

PREVENTIVE MEDICINE—INDIVIDUAL PROPHYLAXIS.

LISTERINE destroys promptly all odors emanating from diseased gums and teeth, and will be found of great value when taken internally, in teaspoonful doses, to control the fermentative eructations of dyspepsia, and to disinfect the mouth, throat and stomach. It is a perfect tooth and mouth wash,
INDISPENSABLE FOR THE DENTAL TOILET.

DISEASES OF THE URIC ACID DIATHESIS.

LAMBERT'S LITHIATED HYDRANGEA.

RENAL ALTERATIVE—ANTI-LITHIC.

FORMULA.—Each fluid drachm of "LITHIATED HYDRANGEA" represents thirty grains FRESH HYDRANGEA and three grains of CHEMICALLY PURE Benzo-Salicylate of Lithia. Prepared by our improved process of osmosis, it is INVARIABLY OF DEFINITE and UNIFORM therapeutic strength, and hence can be depended upon in clinical practice.

DOSE.—One or two teaspoonfuls four times a day (preferably between meals.)

Close clinical observation has caused Lambert's Lithiated Hydrangea to be regarded by physicians generally as a very valuable Kidney Alterative and Anti-lithic agent in the treatment of

Urinary Calculus, Gout, Rheumatism, Cystitis, Diabetes, Hæmaturia, Bright's Disease, Albuminuria, and Vesical Irritations Generally.

REALIZING that in many of the diseases in which LAMBERT'S LITHIATED HYDRANGEA has been found to possess great therapeutic value, it is of the highest importance that suitable diet be employed, we have had prepared for the convenience of physicians

DIETETIC NOTES.

suggesting the articles of food to be allowed or prohibited in several of these diseases. A book of these Dietetic Notes, each note perforated and convenient for the physician to detach and distribute to patients, supplied upon request, together with literature fully descriptive of LISTERINE AND LAMBERT'S LITHIATED HYDRANGEA.

LAMBERT PHARMACAL CO., St. Louis, U. S.

British, Canadian, French, Spanish, German and South American Trade Constantly Supplied.

The Animal Extracts

Perfectly sterilized—prepared according to Dr. William A. Hammond's formulæ, in his laboratory at Washington, D. C., and under his immediate supervision, can now be obtained direct of The Columbia Chemical Company, 90 South Fifth Avenue, New York, or through any druggist, at the price of \$2.00 a bottle.

The extracts at present manufactured are:

- Cerebrine** from the brain, for diseases of the brain;
- Medulline** from the spinal cord, for diseases of the cord;
- Cardine** from the heart, for diseases of the heart;
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- Ovarine** from the ovaries, for diseases of the ovaries;
- Musculine** from the muscles, for diseases of the muscles.

Others are in process of preparation, and when ready the fact will be duly announced to the profession.

Several months are required for the extraction of the essential principle of the organs. Extracts purporting to be made in a few days are absolutely inert, and, from their liability to decomposition, are dangerous.

All the existing literature on the subject of the Animal Extracts

MADE BY DR. HAMMOND'S PROCESS

and used in accordance with his theory of their action, will be supplied to members of the medical profession GRATIS on application to

THE COLUMBIA CHEMICAL CO., 90 South Fifth Ave., New York.

A Powerful Uterine Sedative

Particularly efficacious in Engorgement, Inflammation and Induration of the Uterus, in Dysmenorrhœa, Menorrhagia, Leucorrhœa, Amenorrhœa, Prolapsus Uteri, Hysteria, Melancholia, Vomiting of Pregnancy, Habitual Abortion, and Uræmic Eclampsia.

Caulocorea

It is not a nauseous compound, but an elegant elixir. It is a practical Emmenagogue, a safe and reliable Parturient, Antispasmodic, Diuretic, and Tonic.

Formula.—Caulocorea is composed of the active principles of Caulophyllum, Thalictrides, Viburnum Opulus, Prunifolium, Dioscorea Villosa, Mitchella Repens, Aletris Parnosa, combined with Spts. Ætheris Comp. and Aromatics.

A Pound Bottle—Free

to any physician who will pay express charges and say this journal induced him to write. It is prepared solely for the use of physicians, and advertised only in medical journals.

Caulocorea Manufacturing Co.

PORTLAND, ME.

Abstracts.

Specify.

You must know that there are reliable and also worthless pharmaceuticals. Your druggist may be perfectly honest in his convictions that his stock is reliable, but too few pharmacists ever test the quality of the drugs purchased. Many are influenced to sell an inferior quality through the greater margin of profit in it. The only safe rule is to specify, in prescribing, the product of the manufacturer that you know to be absolutely reliable, and see that your request is carried out, and that your druggist keeps in stock the products you want.

Cholera Epidemic in Paris.

Cholera has been rife in Paris eight times since it was first brought there sixty-one years ago, and each epidemic appears to have affected a smaller percentage of the city's population. The following figures furnished by the special correspondent of the *Lancet* do not refer to the actual number of cases, but give the proportionate number affected out of each one hundred thousand people during the different cholera years. The proportion in 1832 was 2,245 per 100,000; in 1849, 1,861; in 1854, 732; in 1865, 354; in 1866, 289; in 1873, 46; in 1884, 44; and in 1892, 39.

Treatment of Nervous Diseases and General Debility.

McArthur's Syrup Hypophosphites demonstrates its restorative powers. Here it is not the stimulating action of the remedies usually classed as tonics that is needed. The organic powers of the system are already taxed to their utmost ability to carry on the physiological processes of life. The hypophosphites of lime and soda gives the much needed effect in these conditions—not that of a stimulant by irritation, but that of a true nutriment to the starving tissues. Its tonic effects are permanent as they are the effects of a richer blood supply, bringing healthy food and oxygen to the tissues. Thus the patient is gradually brought up to his normal condition.

“Pulling a patient's leg for one dollar” is a new surgical operation.

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Piperazine.

The unsurpassed
Uric Acid Solvent.

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Readily *Soluble* Anti-
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gesic and Antipier-
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Chloralamid.

The most harmless
Hypnotic and Ano-
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Antirheumatic, also a
useful remedy in seri-
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Chemically pure.
Intestinal Antiseptic.

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An alkaline Caustic
and Astringent; not
corrosive; does not
coagulate albumen.

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New remedy for
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Camphoric Acid.

Excellent alternative
for mucous mem-
branes.

Strontium Salts.

Bromide, Carbonate,
Iodide, Lactate, etc.,
perfectly pure.

FORMALIN. : : : : :

This new harmless Germicide has a
germicide action superior to Corrosive
Sublimate, without its toxicity and mixes
in all proportions with water. At ordi-
nary temperatures even, FORMALIN
gives off Gaseous Formic Aldehyd, and
the evolution of Gas is, of course, accel-
erated by application of heat.

Drs. J. STAHL, BERLIOZ and FRILLAT,
found that Anthrax Bacilli were killed by
a solution of 1:50,000, while Aaronson
stated that solutions of 1:20,000 pre-
vented the development of Typhus and
Anthrax Bacilli, as well as that of *Staphylococcus Pyogenes Aureus*.

Dr. J. STAHL's observations showed
that after one hour's exposure to a one per
mille, or a quarter of an hour's exposure
to a 1½ per mille solution of FORMALIN,
the most resistant forms of micro-
organisms were destroyed. FORMALIN,
therefore, is equal at least in germicide
power to Corrosive Sublimate, and, under
certain conditions, superior when Albu-
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FORMALIN may be applied in 1 per
cent. solutions by Spray Diffusers, with-
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terials.

FORMALIN is supplied in one pound
bottles.

DIABETINE. : : : : :

The only innocuous and palatable sugar
for Diabetics. A nutritive as well as an
article of real enjoyment, which is com-
pletely oxidized in the system of the
diabetic patient and therefore it is a
positive substitute for sugar. It can be
taken without harm and most nearly
approaches the ideal carbohydrate food,
indicated in diabetes.

DIABETINE has been endorsed by
eminent authorities, notably by Profs.
W. EBSTEIN, KUEZ, LEYDEN, Drs. H.
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DIABETINE is supplied in one pound
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SALOCOLL.—(Phenocoll Salicylate) combines the
action of Salicylic Acid and of
Phenocoll, which in the form of hydrochloride has done
such good service.

Practical experiments have shown that neither gastric
disturbances, alterations of blood-pressure, nor cyan-
osis follow the administration of Salocoll. It has
shown itself a reliable and safe anti-pyretic, anti-
neuralgic and anti-rheumatic, having beneficial effects
in many cases, where other remedies proved of no use.
In influenza its beneficial effects were especially
marked. The dose for adults is 15 to 20 grains in
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divisions of this quantity it can also be given to
children with safety.

SALOCOLL is supplied in 25 Gramme vials.

KRESIN.—A powerful antiseptic and disinfectant,
completely and clearly soluble in water,
for medical, surgical and hygienic use. An excellent
deodorant and germicide in very dilute proportions.
It destroys all contagious germs and foul odors and is
therefore excellently adapted for the disinfection of
excrementitious matter, water-closets, vaults, zincs,
wastepipes, etc. It also destroys mould, fungi, and
dry-rot in houses.

Endorsed by prominent physicians and extensively
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According to experiments made at Dr. E. RITSERT'S
pharmaceutical, bacteriological and chemical institute,
at Berlin, the antiseptic and disinfectant action of
KRESIN, is far superior to that of Creolin and Lysol.

KRESIN is supplied in one pound bottles and ten
pound cans.

Salicylic Acid and Salicylate of Soda.

The oldest and most
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brands.

Chloral and Croton Chloral Hydrate.

The oldest and best
known brands in the
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Salol.

Antirheumatic. In-
testinal Antiseptic.

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Absolutely pure.

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Redistilled for medic-
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Twice distilled, chem-
ically pure. Sp. Gr.
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Very light, chemically
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55 MAIDEN LANE, NEW YORK.

PAMPHLETS FURNISHED ON APPLICATION.

Don't Pick Them Green.

Statistics are said to show that young men do not, on the average, attain full physical maturity until they arrive at the age of twenty-eight years. Prof. Scheiller, of Harvard, asserts, as a result of his observations, that young men do not attain to the full measure of their mental faculties before twenty-five years of age. Better say thirty. A shrewd observer has said that "most men are boys until they are thirty, and little boys until they are twenty-five;" and this accords with the standard of manhood which was fixed at thirty among the ancient Hebrews and other races. A remedy is needed for the progress and propagation of puerility.—*Exchange.*

Given Away to Physicians.

A beautiful, bright aluminum medal, about the size of a silver half-dollar, will be sent to any physician who will write to the COD-LIVER GLYCERINE CO., No. 113 N. Eighth street, St. Louis, Mo., and mention at the same time the CHARLOTTE MEDICAL JOURNAL. This medal is a neat little pocket piece, and is arranged with space for engraving your name, in case of accident. We have arranged with the Company that all who send twenty-five cents in postage stamps (or a quarter), and mention CHARLOTTE MEDICAL JOURNAL, will get in return this medal with their name and address engraved on it, by an engraver familiar with working this metal. Send for it. "It's a dandy."

Mr. Gladstone on Medical Fees.

There seems to be no end to Mr. Gladstone's feats. He has favored the public with another great speech—that on bimetalism, in the course of which he remarked that many things had risen in value in late years. Oddly enough, among the few things he maintained was the remuneration of medical men. "No one is aware of the increase of fees in the medical profession, and I am bound to say that there are none more nobly earned in the world."—*Medical Record.*

"Onions have their uses after all. They often break up a cold."
"And sometimes an engagement."

Alkaloidal Medication

Therapeutics--Present and Prospective.

Extract from a Paper by DR. C. W. BEAUMONT, of Clarksville, Tenn.

"The crudeness of the materials from which we must derive our medical resources, and the wide variability in quantity noticeable in each particular drug, resulting from physical, clinical, and meteorologic causes, necessarily leads to inappropriate dosage, and hence to uncertain effect. Even those subject to careful assay, as for example, fluid and solid extracts, and obtained from the very best pharmacists, are not wholly exempt from such changes, and when administered produce capricious effects, or, on the other hand, prove to be utterly inert—in either case bringing disappointment and mortification to the prescriber, and, it may be, peril to the patient. Accordingly, in ordering a formula, to be in dram doses, we do not know whether a full or a minimum dose will be had, or, indeed, whether much or little or any medicine at all is received."

The trouble described above by Dr. Beaumont is entirely obviated by the use of the Dosimetric Granules, manufactured by the

DETROIT METRIC GRANULE CO.

These Granules are accurate in division of dosage, prepared from the purest drugs and chemicals obtainable and positively soluble. Can be reduced to a powder under the spatula and are useful, hypodermically, as they produce a perfectly clear solution with water. Cheaper than ordinary medicines; effective; positive, reliable. No uncertainty as to strength of dose, easy for the physician, inexpensive and therefore, the choice of the patient. We send price list and samples of Granules to physicians using them and those contemplating a change to this modern method, and, their name is "Legion." The practice of Dosimetry (measured doses) is fast superseding the old style of administering medicines, because it is a vast improvement, and progressive physicians must keep up with the times.

Send for price list and samples, stating kind preferred. Vest pocket case containing 12 vials filled with granules \$1. Larger cases in stock.

ADDRESS

Detroit Metric Granule Co.

DETROIT, MICH.

Spasmodic Croup.

Dr. Albert Brubaker says that spasmodic croup in children, coming on suddenly at night, is often due to impaired digestion brought on by eating some heavy food just before retiring. If the stomach in these cases be emptied by an emetic, it will be found that the croup will also disappear.—*Col. and Clin. Rec.*

Cardiac Remedy.

Cactina has a soothing effect upon the nervous centers of respiration and cardiac action, greatly promoting normal functional activity. It reduces the force and frequency of the heart's action, and tones the nerves.

In angina pectoris, pneumothorax, or dyspnea from cardiac weakness, it is specially valuable. It has a direct action on the weak or irregular or intermittent heart.

A Bright Little Girl.

Flossy is a little girl whose ideas of creation are yet crude, but she is very curious. "Is all of us made out of dust, mamma?" she asked the other day. "Yes, Flossie." "Little babies, too?" "Yes." The child was silent for a moment. "Mamma," she said, "Heaven must be a drefful dusty place."

Cystitis.

Tritica has been recommended by (Weekly Med. Rev.) by high authority, and the Searle & Hereth Company are prepared to exhibit most valuable testimonials of the efficacy of their product in cystitis, urethretis, pyelitis, and allied conditions.

Dr. M. C. Strickland, of Salem, Va., writes: "I regard your Burgess' Compound Tincture Four Chlorides as being the most effective and elegant preparation of its kind made, and I will use it in my practice."

To Snellings & Burgess, Manchester, Va.

Fifty thousand physicians, or over one-half the entire medical profession in the United States, prescribe "Hayden's Viburnum Compound."



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My experience in these cases, with the Helonia Tablets, has been so highly gratifying, and the ordinary astringent injections are at times so unsatisfactory, that I intend to keep a stock of the Tablets on hand and prescribe them in all cases where indicated.

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Peoria, Ill.

My experience has been so highly satisfactory that these tablets form a part of my daily armamentarium and I would not be without them at any cost.

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For Mouth Breathers.

An old writers informs us that "It is a known fact that man can inhale through his nose for a certain time mephitic air, in the bottom of a well without harm, but if he opens his mouth to answer a question, or calls for help, in that position, his lungs are closed and he expires. Most animals are able to inhale the same for a considerable time without destruction of life, and, no doubt, solely from the fact that their respiration is through the nostrils, in which the poisonous effluvia are arrested."

Leucorrhœa and Dysmenorrhœa.

Send to Henry K. Wampole & Co., Pharmaceutical Chemists, Philadelphia, Pa., and get a sample of their Asparoline Compound, and see how pleased you will be with its results in the above-named diseases.

A Bullet-Proof Dress.

A good deal of speculation has been aroused in Europe by the report that a dealer in cloth has invented a bullet-proof material. The coat, which would be a little over half an inch thick, weighs only six pounds. Billroth points out that protecting the body only and not the limbs will by no means do away with the dangers of battle. It does not sound probable that material of this weight and thickness could possibly be made to resist the enormous velocity of modern bullets.

WAVERLY, N. Y., 1893.

I have just used Iatrol in quite a number of cases of traumatic injuries, and find in all cases it is vastly superior to Iodoform, and where I select the dry form of treatment, I believe it to be preferable to any other agent I have ever used. It is especially adapted to sloughing or indolent conditions, either iodopathic or traumatic.

(Signed)

R. SAYRE HARNDEN,
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Cholera.

Cantani claims that no other agent equals tannic acid in the treatment of cholera.

ELIX IODO-BROMIDE OF CALCIUM COMP.

SYPHILIS TUBERCULOSIS

It can be combined with Hydrarg. Bichloridum without precipitation or chemical change.

THE POSITIVE ALTERNATIVE

It is a valuable adjuvant in the treatment of the Syphilitic Cachexia, Tubercular Conditions, and those diseases in which Alternatives are positively indicated. Each ounce contains seventy-two (72) grains of the salt.

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Interesting to Doctors.

Professor G. A. Sacharjin, one of the greatest doctors of the Russian Empire living in Moscow, was recently called to visit Mme. Tereschtschenko, wife of a rich landed proprietor in the Skwira district. In addition to all expenses he received about \$7,000 for his advice and aid. An assistant who accompanied his chief left the country place the richer by \$1,000. M. Tereschtschenko, however, will not miss the money. He hired a special train later to get the medicines ordered by the Professor in Kieff.

Listérine.

The Listerine of Lambert is the *ne plus ultra* of antiseptics. Its agreeable and non-toxic properties make it the daily companion of the progressive physician.

The Chicago College of Physicians and Surgeons held its class-day exercises April 12th. A bronze bust of the late Dr. A. Reeves Jackson was presented to the college and accepted through the President, Dr. C. W. Earle. In the evening the Alumni Association met at the Sherman House and elected as officers for the following year Dr. Weller Van Hook as President, Dr. S. D. Jones Vice-President. At the banquet which was then served a paper was read by Dr. W. C. Caldwell, entitled, "The Gastro-Intestinal Tract," and remarks were made by a number of those present. On the 13th inst. graduation exercises were held at the Grand Opera House and a class of 87 received diplomas.

The uncertain strength of Coca leaves makes this drug very unreliable, unless a preparation is used which we know to be made from a good leaf. "Robinson's Wine Coca" is prepared by percolating assayed Coca leaves with Malaga wine, and has always been found entirely satisfactory.

An Addition to Therapeutics.

Mrs. Selby—"Doctah, the chile dun gone swaller 'r pint ob ink."

Doctor—"Hab yo' dun ennyding fo' de relief ob 'im?"

Mrs. Selby—"I'se dun made 'im eat free sheets ob blottin' paper, doctah. Was dat rite?"

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1. Because it is the softest and purest water known, containing no excess of mineral salts and no lime or organic impurities, being therefore non-irritating to the digestive organs and kidneys.

Dr. G. THIN (British Medical Journal. vol. ii, 1891, page 91) states that the consumption of water containing lime brings about the development of gouty conditions; no doubt it acts in the same way as the contamination of the water by lead.

2. Because it contains Iron in combination with the alkalies, Sodium and Potassium in small quantities, as recommended by Profs. Flint, Thomson, Draper and others.
3. Because it comes from a region free from malarial germs.
4. Because all its mineral salts, and five of them in the exact form given in its analysis, are found in the human blood, of which they form a most essential part.

Analysis.—Each gallon contains :

Carbonate of Iron.....	1,100	GTS.
Oxide of Iron.....	0,310	"
Chloride of Sodium.....	1,000	"
Sulphate of Soda and Potash.....	0,310	"
Carbonate of Soda and Potash.....	0,831	"
Carbonate of Magnesia.....	1,230	"

4,781 "

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Wheeler Chemical Works, 170 Lake St., Chicago, Ill.

Cholera at the Eleventh International Congress.

At the request of the Indian Government, the Organizing Committee of the Eleventh International Medical Congress, to be held at Rome in September, has decided to have a Section to be devoted to the consideration of the subject of cholera, to discuss its origin, the means of arresting its diffusion, and its treatment.

A sad and unusual accident is reported to have occurred recently in the operating theater of one of the London hospitals. One of the surgeons was engaged in sewing up the wound after a laparotomy, and while in the course of doing so, he seems to have given a flourish to the needle in his hand, which penetrated one of the eyes of his assistant. The latter continued for some moments to attend to his duties, but was afterward compelled, owing to the pain in his eye, to leave the side of the operating table and sit down on one of the benches of the theater. As soon as the operation had been completed, the surgeon examined the injured eye of his assistant, and found that the lens was lying outside the organ, the sclerotic extensively torn, and the vitreous protruding.—*Medical Record*.

Puerperal Eclampsia.

In puerperal eclampsia, when the spasms are apparently under control, look out for a return of the spasms if the pupil remains contracted.

They had asked Dr. Sandblast, the eminent surgeon, to carve the festal fowl, and he stood over it with the carving knife delicately held in the first position. "The incision, you will observe, gentlemen," he began dreamily, "commences a little to the left of the median line, and—oh, excuse me, Mrs. Parmalee, I thought I was in the—*may* I help you to a little of the femur?"—*Puck*.

A Glasgow physician is the defendant in a curious breach of promise case. His courtship was progressing smoothly enough until his *fiance* requested his services for treatment of a fistula. The trouble was of tuberculous origin. He treated the case, but lost his affection for the fair but unfortunate patient. Perhaps if he loses his case, he can offset the damages by a bill for professional services.

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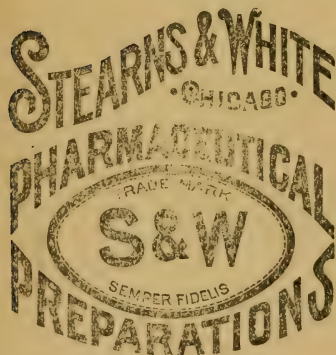
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HYPNOTIC and SEDATIVE in Insomnia, Delirium, etc.

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Average dose, 5 to 10 grains.

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This preparation is endorsed by the best physicians in the North. A trial will convince you of its high merit. Sold at 60 cents per ounce. Sent by mail upon the receipt of price. Samples sent upon appli-

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Miscellaneous.

Formalin : An Ideal Harmless Germicide.

The fundamental and classical work of Koch and his co-workers and the labors of many others have thrown light upon the true aims of disinfection, and established the best methods of ensuring successful results. These aims are the absolutely certain destruction of all pathogenic germs, in the shortest possible time, with the least expense, with a minimum of injury to the articles to be disinfected, and without detriment to the health of the persons using the disinfectants.

The methods so far devised for application for solid objects comprise : (1) mechanical cleaning, (2) currents of steam, and (3) the use of chemical disinfectants. Passing by the first as an important but only partial and tedious *modus procedendi*, the second may be characterized as certain if carried on for a long enough time. Unfortunately a great number of things are too large for such treatment, others are spoiled by it, and, further, costly apparatus is necessary.

As regards chemical disinfectants there has been a conspicuous lack of substances which fulfil the requirements mentioned in the first paragraph. Some disinfectants are not sufficiently powerful in action, others have a disagreeable odor which they communicate to the articles on which they are used, and others attack most objects more or less vigorously. Among the number of antiseptic substances known at present there are only a few which are capable of destroying all germs of organic life within 24 hours. After eliminating osmic acid, only sublimate, and, under certain conditions, chlorine and bromine are left. The two latter, however, are practically of little value, and against the application of sublimate its enormous poisonousness militates as well as the fact that it is inactive with albumenoid substances.

In view of this manifest deficiency a research was directed to the discovery of a compound which should have a germicidal action similar to that of sublimate without its toxicity, and which should be suitable for use not only in the moist condition (*i. e.* in solution), but also in a dry form (*e. g.* as gas). Now, reference was made to the anti-bacterial action of formic aldehyde by Low in 1886, while

further work had been done upon the compound by Aronson and by Berlioz and Frillat. More intimate examination of the properties of this aldehyde revealed astonishing results more than confirmatory of those of the authors named above.

Formaldehyde (HCOH) as known is a gas under normal conditions of temperature and pressure; it is readily soluble in water, and such a solution of 40 per cent. strength is put forward under the name of "Formalin." This liquid mixes in all proportions with water and any required dilution can be readily prepared; thus, for instance, by mixing 1 part of Formalin with 40 parts of water, 41 parts of a 1 per cent. solution are at once obtained.

Even at ordinary temperatures, Formalin gives off gaseous formic aldehyde and the evolution of gas is of course accelerated by application of heat.

Exhaustive and numerous experiments on the bactericidal power of Formalin were carried out by Dr. J. Stahl, Berlioz and Frillat, already mentioned, had found that anthrax bacilli were killed by a dilution of 1: 50,000, while Aronson stated that solutions of 1: 20,000 prevented the development of typhus and anthrax bacilli as well as of *Staphylococcus progenes aureus*. Stahl's observations proved that after one hour's exposure to 1 per mille, or a quarter of an hour's exposure to $1\frac{1}{2}$ per mille solution of Formalin, the most resistant forms of micro-organism were destroyed. At the least, therefore, Formalin is equal in germicidal power to sublimate and under certain conditions would be superior where albuminoid solutions are concerned.

As already intimated, great importance is attached to the applicability of the ideal antiseptic in gaseous or vaporous form, as only in this way can we conveniently disinfect large rooms and more delicate articles in closed apparatus. The experiments carried out by Dr. Stahl with Formalin vapour were made in a large glass bell in which was set a small table carrying potatoes freshly inoculated with pure cultures of typhus, anthrax, cholera, etc. The glass bell stood upon an iron plate which exactly closed it. The experiments showed that 2.5 volume per cent. of Formalin in the air destroyed all micro-organisms in a quarter of an hour. Undoubtedly even better results would have been obtained, could a constant stream of Formalin vapour have been conducted over the cultures.

The interesting observation was made, early in the examination

of the properties of Formalin, that when allowed to evaporate in the presence of wool, gauze bandages, or other dressing material, the vapours condensed upon the fabrics in solid form (paraformalin), and so disinfected them. On evaporating again from the solid form, paraformalin was dissociated into Formalin vapour and exerted an antiseptic influence upon its surroundings. Hence, dressing materials treated with Formalin are not only perfectly sterile, but can be immediately used as antiseptic dressing.

Dr. Stahl packed some silk threads carrying anthrax spores in a large ball of unsterilized dressing wool, and exposed the whole to the vapors of Formalin spontaneously evolved from kaolin-blocks which had been soaked in the germicide. After an exposure lasting 48 hours the spores were destroyed. The kaolin-blocks soaked in Formalin are brought out under the name "Formalith," and designed for placing in closed vessels with dressing materials, which by this means can be kept perfectly aseptic.

Another series of experiments was designed with the view of determining the microbicide power of the preparation when sprayed upon paper and textile fabrics, which having been carefully sterilized, were inoculated with anthrax and garden-soil spores. After drying, the surfaces were sprayed with solutions of Formalin of various strength. After definite periods pieces of the material were cut off with sterile instruments, washed with alcohol to remove Formalin and placed upon agar-agar.

The results showed that spraying with a 0.5 per cent. solution was sufficient to kill the spores in a quarter of an hour. Solutions of half this strength affected the same end in one hour.

Translating these results into practical figures, and basing the calculations on the observation that 8 ccm. of the $\frac{1}{2}$ per cent. solution was sufficient for 1 square metre surface, Dr. Stahl reckoned that for the disinfection of the walls, ceiling and floor of a room 23 feet square and 13 feet high, not more than three pints of the solution, or about 6 drms. of the 40 per cent. Formalin would be required. As these figures assume that all the solution used falls on the walls, etc., somewhat more would, of course, be necessary in actual practice. For the disinfection of a room in the Lazarus Hospital of about the size specified above, about $4\frac{1}{2}$ pints of a 2% dilute solution was used from two small spray apparatus, the time used in the process being half an hour. The strength of the

solution employed was unnecessarily high, but nevertheless no marked discomfort was experienced by the persons working the sprays.

Other materials, such as silk, satin, plush, wool, linen, etc., were similarly treated, a 2 per cent. solution being employed and for a longer period, as the fabrics were of thicker texture than paper. All the specimens were disinfected by half an hour's spraying of the two per cent. Formalin solution. It was found that the excess of solution could be readily got rid of by "airing" the material, and scarcely any trace of odor remained. Further, the colors of the papers and materials, treated with the disinfectant, were entirely unaffected.

Turning to the consideration of the physiological properties of Formalin, it stands recorded by Aronson, Berlioz and Trillat, that formic aldehyde is relatively non-poisonous. The manufacturers of Formalin also noted that men, working day after day in an atmosphere loaded with the vapors, felt perfectly well, and when they had accustomed themselves to the peculiar penetrating odor of the aldehyde, did not experience any discomfort in their work. It has been already noted, that a room in the Lazarus Hospital was disinfected by a 2 per cent. solution without any marked unpleasantness to the operators.

When brought into contact with the animal skin, undiluted Formalin exerts a kind of tanning effect, making it impermeable, and finally brings about its necrosis. This action depends upon the property of Formalin of very readily penetrating living and dead animal tissue and forming with it a sort of combination. The tissue is destroyed without suppuration or formation of a sore.

Some of the experiments establishing this property may be briefly stated. By repeatedly painting a limited area in the skin of a rabbit with Formalin, its necrosis was brought about, so that after a few days it was cast off with the hair growing upon it. The point of a rabbit's ear was painted for four days consecutively, three times a day, with 40 per cent. Formalin. After 10 days the part fell off spontaneously without the slightest bleeding, and smooth as though cut with a knife.

Quite similar was the effect upon the human epidermis. A small area on the forearm was left in contact with paraformalin for two

days; the skin became hard and insensitive, and after a few days a thick horny crust gradually separated, leaving a deep scar.

The application of this action of Formalin to surgery is obvious; probably the preparation would be useful as an external application against lupus, cancer, or in very dilute solution (up to $\frac{1}{2}$ per cent.) for the irrigation of cavities. Similarly Formalin might prove of value for the removal of diseased growths on the epidermis or the mucous membrane. The *modus procedendi* might be either the arrest of development of such growths by painting the roots or pedicels with Formalin or the gradual destruction of the excrescence itself by the repeated application of the preparation.

Summing up the results of all these experiments, the properties of Formalin may be expressed as follows:—

1. It has an extraordinarily active microbicide power similar to that of sublimate.

2. It is comparatively non-poisonous.

3. It attacks only the substance of the contagious material, leaving intact the articles treated, whether of organic or inorganic nature.

4. It is very readily employed under all circumstances either as liquid or in gaseous form.

It is a marked advantage of the vapor of Formalin that its specific gravity closely approximates to that of the air, so that there is no difficulty in keeping the atmosphere of an enclosed space uniformly impregnated with Formalin vapor.

Dr. Stahl recapitulates the methods of using Formalin by spray and vaporization, pointing out that for the superficial disinfection of furniture, articles of clothing, etc., spraying with a $\frac{1}{2}$ per cent. solution should be resorted to and carried out with as much energy as possible. In gaseous forms the preparation promises to do good service in the dry disinfection of more delicate articles in closed vessels as well as of furs, dressing material and the like.

Formalin is manufactured by the "Chemische Fabrik auf Actien," formerly E. Schering, in Berlin, Germany, and introduced to the medical profession of this country through their sole representatives in the United States, Messrs. Schering & Glatz, No. 55 Maiden Lane, New York, N. Y.

Dr. W. H. Battle, of Lilesville, N. C., highly recommends Sanmetto in genito-urinary troubles.



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Cardiac Paralysis.

Many cases of death are caused from vasomotor paralysis of the heart, superinduced by the administration of alcohol in the practice of physicians.

From an interesting review of recent additions to *Materia Medica*, made by the New York correspondent of *Notes on New Pharmaceutical Products*, we extract from his chapter on Antipyretics the following terse reference to the now well-known American product Antikamnia:

Antikamnia, the most conspicuous and first American introduction in this class, occurs as a white, micro-crystalline powder, not readily soluble in water but easily in alcohol; odorless and tasteless, and best administered in five to ten grain doses in powder form, in wafers or cachets, or in compressed tablets. The popularity of Antikamnia has been enormous, and it is not only employed preferably by the majority of physicians in this country, but has won renown in foreign lands, and is largely used in Canada, South America, Europe and Australia. Voluminous literature from the profession of the entire country, together with abundant society reports on Antikamnia, attest that it is a valuable and prompt antipyretic, anti-rheumatic and analgesic, and is indicated in the endless variety of manifestations of disease and physical derangement implied by these characters.

In further illustration of the repute Antikamnia has secured, we print the following letter from Dr. Granby, the well-known editor of the *Atlanta Medical and Surgical Journal*:

ATLANTA, Ga., April 24, 1893.

Antikamnia Chemical Company, St. Louis, Mo.:

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Yours very truly,

L. B. GRANDY, M. D.

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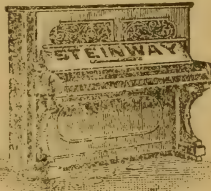
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Flavell's Improved Uterine Supporter. Price to Physicians, \$2.

No Leather to become hard and stain the Linen. Made of Silk Elastic with Sateen Jean Trimmings. Never fails to give perfect satisfaction, even in the most difficult cases where any instrument can be used. DIRECTIONS FOR ORDERING.—Give circumference of Abdomen two inches below navel, and state if for Prolapsus, Anteversion or Retroversion.



Fig. 1.

ABDOMINAL SUPPORTERS.

DIRECTIONS FOR MEASUREMENT.

Give exact circumference of body at K, L, M.

PRICE TO PHYSICIANS:

SILK ELASTIC, \$2.75. THREAD ELASTIC, \$2.00.



Fig. 4.

Never fails to give perfect satisfaction, and is very comfortable to the patient. It is indispensable for women during pregnancy and after confinement, as it prevents those bearing down pains which are experienced during gestation. Goods sent by mail upon receipt of price, or by Express C.O.D. charges for returning money added.

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Flavell's Suspensory Bandages at all druggists. Send for Price List of Elastic Stockings.

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It is often said that physicians are well used to ingratitude, but perhaps they could bear the unpalatable draught with composure if it were always as amusingly presented as in the following case :

Dr. J. M. Warren had been in the habit for a number of years of giving professional advice to a lady in reduced circumstances, whom he regarded as hardly able to offer him any compensation.

At length she ceased consulting him and he did not see her for a long time. Finally, happening to meet her in the street, he said to her :

"Why, Mrs. —, what has become of you ? You haven't been near me for months."

"Well, the fact is, Dr. Warren," she said with all simplicity, "I didn't seem to gain very much and I thought I'd consult a pay-doctor."

Metcalf's Coca Wine is always uniform, therefore always reliable. As a tonic and invigorator it is always safe, agreeable and certain, being prepared from freshest coca leaves and the purest wine, with the utmost skill and precision. For fatigue of mind or body it is invaluable.

Appendicitis or Impacted Calculus.

In diagnosing appendicitis it is well to remember that a calculus lodged in the ureter may closely resemble that disease.

About thirty years ago I remember a case in which this condition occurred. A patient who had suffered attacks of gravel years before, experienced severe pain in the right iliac region, which rest, morphia, etc., relieved. No symptoms of calculus in either bladder or kidney were observed at the termination of this attack. After this a feeling of soreness or slight pain was experienced in a fixed spot after active exercise ; but horseback riding brought on several severe attacks, in the last of which atropia was combined with morphia. The night following, an urgent call to empty the bladder brought away a calculus in shape and size like a large grain of coffee from a one-seeded berry. The smooth, round body, with a longitudinal groove, permitted the easy passage of urine except when jolting produced displacement lengthwise. No further attacks have since occurred.

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Hypodermic Tablets, Elixirs, Fluid Extracts, Specialties, Etc.

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THE MALTBIE CHEMICAL CO.

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Too Late.

The professor of materia medica in Jefferson Medical College, at one time, asked a not unusually bright student during the "quiz": "How much is a dose of —, giving the technical name of croton oil. "A teaspoonful" was the ready reply. The professor made no comment and the fellow soon realized that he had made a mistake. After a quarter of an hour, he said: "Professor, I want to change my answer to that question." "It is too late, Mr. ———," responded the Professor, looking at his watch, "your patient's been dead fourteen minutes."

Advertising Sheets.

A sad commentary on modern medical "journalism" is contained in a brief letter from an old and valued subscriber to the Medical Index, as follows: "Please stop my Index. I am now receiving more journals than I can read, *sent by advertisers, gratuitously*. I wish your journal continued success. Your dear friend, etc., Dr. ———." This comes from the prevalence of "journals" like Merck's Bulletin, and unless something is done soon to check the spread of this kind of "literature," legitimate medical publications will be driven from the field at no distant day.—*Lanphear's Medical Index*.

Do the Sick Ever Sneeze ?

Do those who are seriously ill ever sneeze ? This is a point alluded to by Mr. Jonathan Hutchinson in the January number of his Archives. He does not recollect himself to have seen any but fairly healthy persons sneeze. He puts the question with especial reference to the wide-spread popular superstition that sneezing is a sign of health and good luck. It is possible, he thinks, that this may have been its origin in the fact that it is for the most part an act restricted to those in fair health. Tyler, in his "Primitive Culture," gives interesting facts as to the prevalence of this creed and as to certain customs associated with it, and traces it in part to doctrines of animism, but Mr. Hutchinson thinks the suggestion he has given may also have some value.—*The Cincinnati Lancet-Clinic*.

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The most potent and reliable **ALTERATIVE TONIC** yet presented to the Medical Profession, especially useful in the following and their allied diseases:

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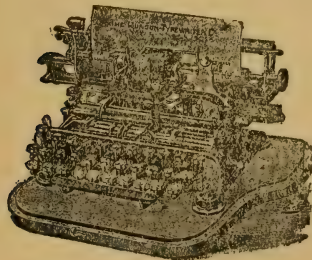
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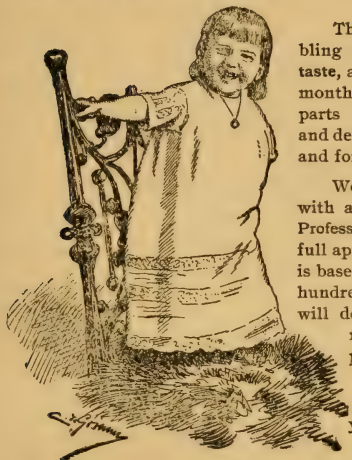
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More nutritious and more palatable than any Liquid Kumyss.

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very respectfully
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Tonic or Alterative
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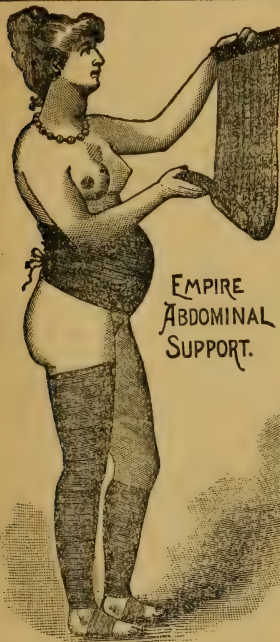
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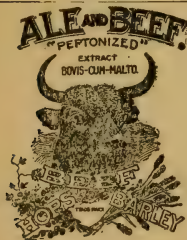
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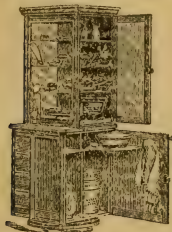
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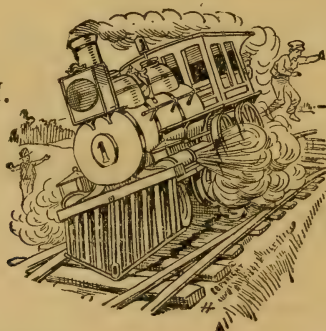
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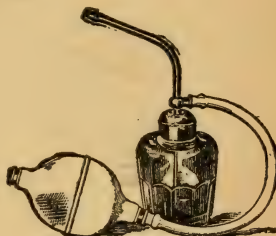
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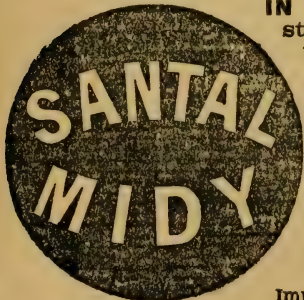
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Fig. I—Normal.

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Fig. IX—Chloroform Position.



Fig. XVII—Dorsal.

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so that the head is placed in the occipito-pubic position. Whether first to last, then, the head becomes occipito-pubic in issuing from the genital organs.

6. *Disengagement of the head.*—The head, generally aided by the accoucheur, is disengaged by a swinging movement, or by a hinge movement around the pubes, analogous to that of the vertex presentation, but the head being turned in the opposite direction there successively escape from the vulva, at the fourchette, the chin, the mouth, the nose, the eyes, and the forehead; after the passage of the frontal protuberances the head escapes brusquely.



FIG. 254.—Successive disengagement of the trunk (variety of the buttocks is here represented; disengagement is the same, with complete breech).

Mechanism in each position and in each variety of presentation.—*Position (complete breech).*—L S I A has been taken as the type and described above.

R S I A.—The right buttock turns forward from left to right to be placed under the pubes. The rotation of the occiput is always made under the symphysis and disengagement is occipito-pubic.

L S I P.—The left buttock turns forward and from left to right.

R S I P.—The right thigh turns forward and from right to left.

Varieties of presentation.—The complete breech has been taken as the type of the mechanism. All that has been said applies to this variety.

Incomplete breech, variety of the buttocks.—The engagement in this variety often occurs during pregnancy. This precocity is due to the relative diminution of the fœtal pelvis by the extension of the

the contiguous parts, and it is very difficult and sometimes impossible to enucleate them. Dermoid cysts have also been seen to lodge in the retro-peritonæal pelvic cellular tissue.

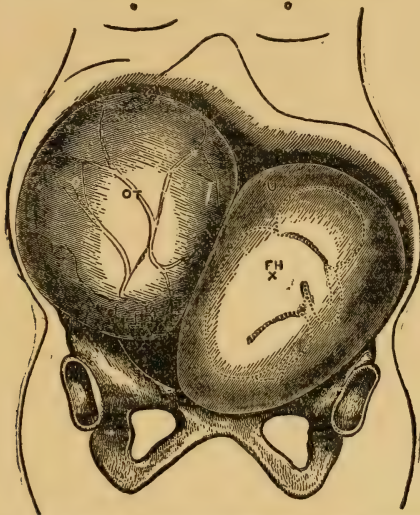


FIG. 241.—Cyst of the ovary complicating pregnancy. OT, cyst pushed out of the pelvis by the uterus; FH, center of auscultation of the fetal heart sounds.

Adhesions.—In the first stages of the development of cysts the cylindrical epithelium which covers them protects against the formation of adhesions (Waldeyer). But the desquamation of this covering permits, finally, the formation of adhesions under the influence of friction and external irritations. Loose and glutinous in the beginning, they become more and more fixed with time. The anterior surface of the cyst has been seen to be so intimately adherent to the peritonæum that operators have detached this structure from the abdominal walls for some distance under the belief that they were separating the cyst itself. The epiploic adhesions may be so extensive and so vascular that the cyst finds its principal source of nourishment in them. The intestine may be fused with the cyst wall so that a dissection may be impossible. Adhesions to the pelvic walls are especially grave on account of the danger of rupture of a ureter or of a large vessel; it is sometimes impossible to overcome them when they are very extensive. They are almost always distinct adhesions of a retro-peritonæal cyst without interposition of the serosa.

Ascites.—The presence of a very small quantity of liquid in the peritonæum is quite frequent, but its accumulation in the form of

limb—single, double, or split—serves to retain rectal dressings, with the advantage that the split tails may come up on each side of the scrotum.

(6) *The four-tailed bandage* is used in fracture of the lower jaw.

(7) *The many-tailed bandage* (or bandage of Scultetus), consists of a central strip or backbone of bandage, to

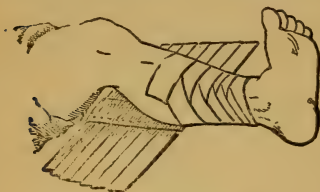


FIG. 31.—Many-Tailed Bandage.

which some eighteen shorter imbricated strips (Fig. 31) are stitched at right angles. The limb is laid on the bandage so that its axis corresponds with the central strip and, beginning at the periphery, the strips are gently and firmly folded over as seen in the diagram. A pin at each side, securing the two last strips to their predecessors, serves to fasten all safely. By taking out the pins,



FIGS. 32 and 33.—Triangular Handkerchief supporting the Elbow, *a* and *b*.

and flinging the tails right and left, the whole bandage is readily taken down, and a fresh dressing having been applied, the strips may once more be folded over so that the limb need not be disturbed in

the least. For burns and painful wounds, such a bandage is to be commended.

(8) *The triangular handkerchief*.—The use of slings, in place of the bandage, has been revived in recent years. Esmarch, of Kiel, has especially drawn attention to their use in military surgery. The handkerchief possesses many advantages. It can be speedily and easily applied. It is available for many varied purposes, and is readily washed. In using the sling, the base of the triangle



FIG. 34.—Triangular Handkerchief supporting the Elbow, *c*.

should always be applied to the part which requires support. Thus we see in Figs. 33 and 34, the elbow and wrist suspended. The loose end may be tucked up, and for neatness secured with a safety-pin; but on no account should the pin bear any weight—that is all borne by the longer ends of the handkerchief, which should be tied in a reef-knot.

Fig. 39 shows the sling adapted to retain dressings on the head. In a similar way, we may cover in the hand or foot. With one handkerchief rolled as a cravat, and applied so as to give a fixed point, a second may serve to secure a dressing, as in Figs. 37 and 38, where the shoulder and hip are seen covered in. Such examples may suffice.

(9) *The square handkerchief*.—A good head-dressing may be formed from a

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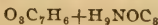
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Charlotte Medical Journal.

VOL. III. CHARLOTTE, N. C., AUG., 1893. No. 2.

Original Communications.

Practical Observations on Treatment of Summer Complaint

BY W. E. FITCH, M. D., OF GRAHAM, N. C.

Since I began the practice of medicine I have had *some* experience in the treatment of summer complaint. I have formed some opinions relative to the disease at variance with those generally held by the profession; and I think it not out of place for me to record them in this paper, that my brethren may accept or reject them as their better judgment may determine.

Every physician who has witnessed summer complaint of infants and children is aware of the fact that the mode of feeding has much to do with its occurrence. Infants under the age of eight months, if bottle fed, nearly always have summer complaint. The younger the infant the less liable it is to digest any other than breast milk and the more liable is it, therefore, to suffer from summer complaint if bottle fed. Artificially prepared foods, in lieu of breast milk, in the hot summer months almost always produces summer complaint. Feeding an infant on the ordinary table foods, prepared for adults, if fed to an infant it overtaxes the infant's digestive organs, and summer complaint is the result. The child's second summer is the period of greatest liability to summer complaint, because they are allowed to eat at the table and of the foods prepared for adults, and the digestive function is overtaxed—wherein the child, in its first year, is wet nursed. Such facts, with which all physicians are familiar, show how important the diet is as a factor in causing summer complaint. Another cause, often overlooked by mothers, is insufficient clothing, allowing the infant to be exposed to draughts of air in the apartments at night they contract an intestinal inflammation, just as another child would contract coryza or bronchitis from the same cause.

Summer complaint usually begins gradually with languor, fret-

fulness and slight rise in temperature. The diarrhoea at first usually attracts little attention from its mildness. The evacuations, while thinner than natural, vary in appearance, being brown, yellow or green. Infants with milk diet usually pass greenish stools of a putrid odor containing particles of undigested coesin; the tongue at first is moist and covered with a whitish fur. The pulse is accelerated according to severity of the attack. In advanced cases the face and extremities are cool and pallid. If the case is bending towards a fatal end, the imperfect action of the skin and kidneys is noteworthy, the skin is hot and dry. In protracted cases there is marked weakness and emaciation.

With the foregoing views as to the etiology and symptomatology, the treatment will be considered.

First, the child's strength must be sustained and its general welfare closely watched. If I can see the little patient early enough, I order 1-grain doses of calomel rubbed up with sugar of milk, given every four hours till all the intestinal contents are removed, and follow this with a small dose of the time-honored castor oil. This is for a child twelve to sixteen months old; for a child six months old, one-half the dose; and often forced evacuations are established. The number of stools will grow less, and even under these circumstances the nervous symptoms will be often improved and the temperature lowering. To rid the bowels of the pathogenic micro-organisms of summer complaint, keep out of the child's stomach the foods on which they thrive. Try and ascertain the offending food and withhold it, allowing at the same time foods which will not serve as a nidus to entertain the offending micro-organisms. When the stools are putrid, with an intensified fœcal odor, they indicate the decomposition of proteid material, and no other kind of foods can give rise to putrid odors than the albumens. In such cases it is clear to any fair-minded physician that albumens are to be withheld and carbohydrates should constitute the food. Nice, clean, fresh soda crackers are as good as you can use. Arrowroot and rice are much used, but crackers serve my patients best. With a diet of this type the putridity of the stools soon disappears, usually in 24 to 48 hours, with improvement in the systematic symptoms.

There is another well marked form of abnormal intestinal fermentation which can be clinically recognized—the acid. An excess

of carbohydrate foods will lead to the development of acids and gases. Under no circumstances can carbohydrates yield products with a putrid odor. Where the stools are acid with sour odor, the carbohydrate foods must be diminished.

Acid fermentations are maintained by the sugars, starches, and to some extent also by the fats. The acid fermentations are less dangerous to the child than the putrid fermentations, because in them no systematic poisons are produced. The only danger of acid fermentations lies in the fact that their products are capable of producing ulcerative lesions. Whatever food is allowed in summer complaint should be given in small quantities at periods of considerable duration. In treating the acid form of this disorder, if you withhold all carbohydrates and put the child on milk (cow's and breast) you will set up a putrid form of the disorder and transform a comparatively harmless form of the disease into a harmful one.

In mild cases you can still allow carbohydrates in small quantities, but if the case is severe and the child weak withhold *all* food for twenty-four hours and stimulate with good old apple or French brandy, and on returning to food, milk alone should be allowed, as the Carbohydrate it contains—Milk Sugar—is the least liable of any to continue the disturbance. Attempts to overcome the intestinal fermentation and to disinfect the intestinal canal by medicines have been disappointing. Salol and the Salicylates are of but little value. Small doses of Calomel however is a drug of much importance. The Subnitrate of Bismuth is a drug of great value, approaches very near the ideal disinfectant, but must be given freely from 10 to 20 grains at a dose, repeated every six hours, it will act as an astringent and the locking up of the poisonous feces must be guarded against. Water in and externally is of much value. Baths are particularly useful, being stimulating and grateful to the patient, often followed by peaceful rest so much needed by the infant. Water internally in small quantities is advantageous. The Buffalo Lithia from Spring No. 1 is my preference, kept ice-cold and given patient at will. It is very important in the treatment of Summer Complaints to aid digestion while we are giving an antiseptic. The following is a favorite prescription of mine, which I have used with happy results:

R	Acidi Hydrochlorici (dilute) ℥.....	xvi
	Pepsini Purinu.....	3 i
	Bismuthi Sub-nitras.....	3 ii
	Syrupi Simplex.....	f 3 ii
	Aqu Dest.....	f 3 xvi

℥ Sig: Shake bottle and give teaspoonful before each feeding or nursing to an infant one year old, half the dose to an infant of six months.

This prescription must be made fresh every second day and kept in a cool place as it is prone to fermentation and would be unfit to use. Opium is a drug much used and abused in this disease, and is Contra indicated in this disease except in persistant acid fermentation which threatens to produce anatomical lesions.

Hydrogen Peroxide in Contagious Diseases—Cholera, Yellow Fever, Typhus, Typhoid Fever.

BY CYRUS EDSON, M. D., NEW YORK, Commissioner of Health, Health Department, New York City.

It is not my purpose in this short article to laud the merits of hydrogen peroxide in the treatment of diphtheria or of scarlatinal angina, for in the cure of these diseases the remedy in question has no equal. Its efficacy cannot be justly questioned.

Other more competent observers than I have called attention to the wonderful effect of this agent in the treatment of ulcers, and ulcerating surfaces. The splendid results obtained by numerous distinguished physicians and surgeons through the use of hydrogen peroxide in various diseases are well known to the profession.

I desire, however, to emphasize in a few words the fact that we have in H_2O_2 a powerful antiseptic agent which may be administered without harm to the human system, and by means of which the alimentary canal can be more thoroughly disinfected than by any other agent in our present range of therapeutics. In other words, there is no other antiseptic that will effect the amount of germ destruction in the alimentary canal without inflicting injury.

This is true for two reasons :

First, hydrogen peroxide has no toxic properties and consequently may be administered in larger amounts than can the toxic antiseptics.

Second, hydrogen peroxide ranks higher as a bactericide than does any other non-toxic agent, and indeed than do most of the toxic ones.

The elaborate reports made by such men as Paul Bert and Regniard, Baldy, Gibier, Pean and Larrive prove these two facts as conclusively as they can be proven.

It logically follows that we have in hydrogen peroxide a curative agent from the use of which we may expect good results in cases of disease arising from germ infection of the stomach and bowels.

In this connection, one fact must be borne in mind: peroxide of hydrogen decomposes rapidly in the presence of organic compounds. We must consequently administer the drug rather freely in order to produce the best effects, and on this account also, free irrigation of the lower intestines as devised and recommended by Dr. Elmer Lee, of Chicago, (Medical Record, December 17th, 1892,) is adapted to effect the greatest good.

The paper by Dr. Lee, to which I have just referred, details the results of his experiments in the treatment of Asiatic cholera at St. Petersburg last year, and advocates the intestinal irrigation for the cure of the disease.

It is impossible to read this able article and not be convinced that the methods advanced are in the highest degree scientific and logical.

The intestinal irrigation is accomplished by means of a soft rubber tube, one metre in length and of suitable size to be introduced into the rectum, in front of the promontory of the sacrum, into and up through the sigmoid flexure and into the descending colon. This tube which is connected with a reservoir should not be too small nor too large, in order to facilitate its introduction through the folds of the sigmoid portion of the lower bowel.

In fact, the greatest difficulty to be encountered, is to successfully pass the tube in front of the promontory of the sacrum, and enter it into the sigmoid flexure. The tube should be of proper firmness to prevent it from bending or buckling upon itself when the end (which in all cases should be rounded) comes in contact with the obstructing folds of the intestine.

Dr. Lee reports very satisfactory results from a thorough irrigation of the intestines with warm water containing a small proportion of liquid soap made of vegetable oil, potash, and glycerine, in connection with peroxide of hydrogen (medicinal) as an internal treatment.

By following Dr. Lee's system of irrigation of the intestinal

canal, with a large amount of the above solution (two or three gallons), the whole amount of infected matter which is present in the intestinal canal is mechanically carried away; after which, by a second and thorough irrigation of the intestinal tract with one or two gallons of warm water containing four per cent. of peroxide of hydrogen, (medicinal) any comma-bacilli which may remain in the intestinal tract will be readily destroyed.

In addition to irrigation or washing out of the intestines, Dr. Lee administers internally peroxide of hydrogen, two ounces diluted with eight ounces of distilled water, in cupful doses every two hours. The addition of distilled water is made in order to increase the bulk of fluid in the stomach.

It is my opinion that this treatment will prove to be "par excellence" the treatment for cholera nostras, dysentery, typhus and typhoid fever.

In the latter disease hydrogen peroxide has already been tried with beneficial results, administered by the mouth.

For yellow fever, hydrogen peroxide must be considered a specific. Gibier has shown that this disease is due to micro-organisms that infect the intestines, and basing treatment upon this fact, solutions of mercuric bichloride have been advocated for intestinal irrigation, and large doses of the drug have been exhibited with good results.

But H_2O_2 is a far safer and much more efficacious remedy. It has been demonstrated that the germicidal power of a solution containing two ounces of H_2O_2 (medicinal) to a pint of water is equivalent to a $1\frac{1}{2}$ per cent. solution of bichloride of mercury. But it is evident that we cannot use the latter without killing the patient while the former solution is harmless.

In the treatment of yellow fever peroxide of hydrogen should be injected into the rectum in the proportion just described, three times daily, the water being warm.

Distilled or boiled water should always be used to effect the dilution of hydrogen peroxide, for the reason that water containing organic matter slightly weakens the strength of the peroxide, a certain amount of the agent being decomposed.

This brings to mind another:

Hydrogen peroxide is a safe and certain water purifier. When added to the contaminated water it instantly destroys any micro-

organisms that the beverage may contain. The proportion necessary to effect this is three per cent.

I have used a solution of H_2O_2 for washing out the stomach through the syphon tube (lavage) in cases of gastric catarrh, with most excellent results.

The therapeutic range of hydrogen peroxide is daily enlarging; a comparatively new remedy, it has already won for itself a place in the foremost ranks of our really valuable medicinal agents.

The advance of medical science is necessarily slow, because it must follow in the wake of the development of allied sciences upon which it depends for its resources.

Chemistry has only recently given us hydrogen peroxide in its pure form and to the efforts of Charles Marchand, of New York, more than to any other man, do we owe this invaluable remedy. A host of imitators have deluged the market with substitutes for his hydrogen peroxide. I have found his preparation *facile princeps*.

Diabetin.

A very exhaustive report on the great value of Diabetin was incorporated in a paper on Diabetes Mellitis, read by Privy Councillor Prof. Dr. Leyden, of Berlin University, at the XV Congress of the Berlin Balneological Society, held March 10th, 1893.

The paper is published in full in the "Deutsche Medizinal-Zeitung, June 5th and 6th, 1893, Nos. 45 and 46, and we give its salient points below.

Prof. Deyden referred to the various experiments which had been made twenty years ago at his clinic (then in Strassburg) with Inulin and Levulose by one of his students, Dr. Komano. It was shown at that time already that the excretion of sugar was diminished when diabetic patients were given these particular forms of sugar. At that time Levulose was very high-priced. Since then the price has been considerably reduced by the Schering process, and therefore Prof. Leyden in 1891 and 1892 again took up these experiments.

Dr. G. Klemperer, his assistant, was able to prove, in the case of two diabetes patients, that the exhibition of from 25.0 to 60.0 gms. (1 to 2 oz.) of Levulose daily for a short period of time, does not increase the sugar of patients, suffering from the grave form

of diabetes. The next experiments were made at the female division of the clinic by Dr. Heyse, staff surgeon to the German army. The daily amount of carbohydrates partaken by the first patient was 170.0—180.0 gms. (about 6 oz.) during some periods 50.0 gms. ($1\frac{2}{3}$ oz.) of Levulose was substituted for the same quantity of cane sugar.

The proportion of sugar in the urine to the quantity of carbohydrates taken, was found to be :

For Levulose (average of 24 experimental days) = 3.9 : 100;

For Cane-sugar (average of 14 experimental days) = 6.6 : 100.

The difference in favor of Levulose, therefore, amounted to 2.7 per cent.

For the second patient the same relation was found to be :

For Levulose (average of 11 experimental days) : 27.5 : 100;

For Cane-sugar (average of 12 experimental days) = 31.9 : 100.

The difference in favor of Levulose amounted to 4.4 per cent. with Fehling's solution and with Einhorn's fermentation tube, all the methods giving corresponding results.

A most remarkable fact, observed in connection with this case is the following :

During the exhibition of Levulose, the amount of sugar in the urine decreased from day to day during the experimental period, so that the oxidation of the carbohydrates increased constantly, showing an adaptation of the system, while just the reverse was true for cane-sugar, the daily amount of sugar in the urine increased during that experimental period.

The result of these therapeutical trials (which are illustrated by diagrammatic curves) is a very valuable one. It is shown thereby that Levulose is put to much better use by diabetic patients and less of it is excreted by the urine than of cane-sugar, which also includes the sugar formed in the system from the carbohydrates of the food. Although none of the above cases were of a very grave character, two at least must be considered as quite serious ones.

A portion of the Levulose was excreted as dextrose without having been put to any use, but this was much less than with ordinary sugar. An amount, more or less considerable, was certainly consumed and put to use in the organism.

These results certainly should encourage us to make use of

Levulose in the treatment of diabetic patients, for the reason that if a moderate amount of this form of sugar is partaken of, say 50.0 gms. or a little more (nearly 2 oz.) per day, a much larger portion of it is consumed by the system, while only an inconsiderable portion is again excreted with the urine.

Prof. Leyden, in continuing, dwells upon the fact that the so-called symptomatic treatment of diabetes is deceptive, in so far as the intention of the physician is only directed towards diminishing or abolishing the excretion of sugar in the urine, by totally withholding sugar and sugar-forming food from the patient.

While it cannot be denied that the unconsumed sugar circulating in the blood has a pernicious influence on all the various tissues of the body, we must take in consideration the fact that in withholding all the food mentioned we actually starve our patient.

Sugar and sugar-forming food constitute more than half of the nourishment a healthy person needs. When we feed diabetic patients on fat and albumenoid food only, we therefore force him to live on his own bone and flesh, from which the system is forced to draw for its needed supply of carbohydrates.

It is well known that pure meat diet carries with it the great danger of inducing diabetic coma; and it is therefore the imperative duty of the physician to furnish his patient with a moderate amount of sugar and sugar-forming food. At the same time, in order to provide for an ample excretion of the circulating sugar, Prof. Leyden suggests to encourage the patient to imbibe a sufficient quantity of liquids.

Such therapeutic measures also tend to avert another fatal danger, viz: death from sheer inanition. It is evident that a diabetic who cannot supply to his system the substances necessary to maintain his strength and to keep the tissues from wasting away, must eventually go on to complete dissolution. Therefore, Prof. Leyden maintains, *that the prime indication is to feed diabetic patients well, in order to prevent progressive emaciation.*

The excellent advice which he gives in this respect, as the quantity and quality of the food to be prescribed, it would lead too far to detail here. But in the light of the fundamental principle thus laid down by this great clinician, it is evident of what great value Levulose (Diabetin) must be in diabetes, since sugar and sugar-forming food must be partaken of to a certain extent by

these patients. The name of Diabetin to this Levulose was given by E. Schering because its main therapeutic use is that of a substitute for cane-sugar in the regimen of patients suffering from diabetes.

Diabetin is supplied in 1-lb. screw-top glass jars.

SCHERING & GLATZ, 65 Maiden Lane, New York,
Sole Agents for United States and Canada.

Notes.

Few physicians, who have practiced medicine five years, but have assured some patient relief, in the use of cod liver oil, only to see the patient sink lower and lower, from want of power to digest the remedy. Cod Liver Glycerine removes this difficulty; capable of being diluted with water, requires no digestion, but is a digestive stimulant. If you give Cod Liver Glycerine it will be assimilated. It combines readily in all prescriptions.

The Superintendent and Surgeon in charge of St. Louis City Hospital. Dr. A. Marks, announces that Cod Liver Glycerine is now used in that institution. Its power to mix uniformly in any proportion, in all prescriptions, or to mix with water and spirits without separating on standing, renders it the most desirable reconstructive in the convalescent period of difficult surgical cases, or acute diseases attended with emaciation; while its digestive properties insure its therapeutic action. †

Senile Gangrene.

Senile gangrene, when progressive, even in the absence of fever, gives indication of high amputation, Power says, above the condyles of the femur, when the process has reached the sole of the feet or dorsum.

A Metamorphosis.—Walker—"Good gracious, Wentman, how you have changed; only a ghost of your former self! What have you been doing?"

Wentman—"Following out the 'Health Hints' in the newspapers."

The doctor was asked: Why should you avoid prescribing castor oil for wealthy patients? He gave it up. Because it is only used for working people, was the explanation.

What They Would Say.

If I should die to-day,
My daughter thus would say,
"Poor papa died of grief,
Death came to his relief,
My *papa* died to-day."

If I should die to-day,
My forward son would say,
"Come, set 'em up, and we
Will have a jolly spree,
The *old man* died to-day."

If I should die to-day,
My wife would sigh and say,
In plaintive tones, not loud,
"No pocket in his shroud,
The *doctor* died to-day."

Mexico, N. Y.

T. J. G.

O! doctor come quick, quick, quick,
My wife is very, very sick;
We were married just nine months ago,
And what the matter is I don't know.

She has pains in her stomach and back,
That seem to draw her double;
Since our marriage this is the first attack,
Oh! dear doctor, what can be the trouble?

For the last seven months or more,
She has been getting bigger and bigger;
While she used to be dreadfully poor,
Oh! doctor, do you think there is danger?

Oh, no, quoth the good old doctor,
It's only a baby I would guess,
And you will soon be a father,
With another to board and dress.

—Ex.

At A New Jersey Sanitarium.

Pilkins—I don't see why you charge me \$6 a day when you charge others only \$4.

Hotel Keeper—Our medical adviser tells me your respiration is twenty-five per cent. above the normal. We don't give air like ours away.

Smith—"What has become of Dr. Cureall?" Jones—"The man who advertised to cure all complaints under the sun?" Smith—"Yes." Jones—"Oh, he died the other day from a complication of diseases."

SYR. HYPOPHOS. CO., FELLOWS

Containing the Essential Elements of the Animal Organization—Potash and Lime;

The Oxidising Agents—Iron and Manganese;

The Tonics—Quinine and Strychnine;

And the Vitalizing Constituent—Phosphorus; the whole combined in the form of a Syrup with a Slightly Alkaline Reaction.

It Differs in its Effects from all Analagous Preparations; and it possesses the important properties of being pleasant to the taste, easily borne by the stomach, and harmless under prolonged use.

It has Gained a Wide Reputation, particularly in the treatment of Pulmonary Tuberculosis, Chronic Bronchitis, and other affections of the respiratory organs. It has also been employed with much success in various nervous and debilitating diseases.

Its Curative Power is largely attributable to its stimulant, tonic, and nutritive properties, by means of which the energy of the system is recruited.

Its Action is Prompt: it stimulates the appetite and the digestion, it promotes assimilation, and it enters directly into the circulation with the food products.

The prescribed dose produces a feeling of buoyancy, and removes depression and melancholy; *hence the preparation is of great value in the treatment of mental and nervous affections.* From the fact, also, that it exerts a double tonic influence, and produces a healthy flow of the secretions, its use is indicated in a wide range of diseases.

NOTICE -- CAUTION.

The success of Fellow's Syrup of Hypophosphites has tempted certain persons to offer imitations of it for sale. Mr. Fellows, who has examined samples of these, **finds that no two of them are identical**, and that all of them differ from the original in composition, in freedom from acid reaction, in susceptibility to the effects of oxygen when exposed to light or heat, **in the property of retaining the strychnine in solution**, and in the medicinal effects.

As these cheap and inefficient substitutes are frequently dispensed instead of the genuine preparation, physicians are earnestly requested, when prescribing the Syrup, to write "**Syr. Hypophos. Fellows.**"

As a further precaution, it is advisable that the Syrup should be ordered in the original bottles; the distinguishing marks which the bottles (and the wrappers surrounding them) can then be examined, and the genuineness—or otherwise—of the contents thereby proved.

Medical Letters may be addressed to

Mr. FELLOWS, 48 Vesey Street, New York.

Charlotte Medical Journal.

E. C. REGISTER, M. D.,

J. C. MONTGOMERY, M. D.,

Editors and Publishers,

NO. 36 SOUTH TRYON STREET,

CHARLOTTE, N. C.

✧ SUBSCRIPTION. \$2.50 PER YEAR. ✧

Articles intended for the Original Department of the Charlotte Medical Journal will be accepted only with the understanding that they are contributed to it exclusively.

DR. ROBT. REED, a promising physician of Stanley Creek, was in the city a few days ago.

CHICAGO can boast not only of having the Columbian Exposition, but also of having 155 women doctors.

THE man who never praises his wife deserves a poor one—and vice versa.

DR. CHAS. GLENN, of Greensboro, died in Baltimore, July 14th. He had been sick only a short time and had been taken there for medical treatment.

ONE of the objects of interest at the World's Fair will be an enormous microscope which is now being constructed. It will magnify 11,000 diameters and will cost \$10,000.

WHEN you have occasion to prescribe a food for an infant, whose mother cannot properly provide for it, remember that Schumacher's Infant food is provided especially for the use of physicians in such cases.

DR. HODGERS, of Wilmington, one of the editors of the North Carolina Medical Journal, has accepted the chair on Anatomy in the College of Physicians and Surgeons, in the new college recently organized in Richmond.

DR. THOS. J. MOORE has been elected to the chair of Clinical Medicine in the College of Physicians and Surgeons of Richmond. Dr. Moore is originally from Charlotte, and this college is to be congratulated upon its wise selection.

ALFRED BOOTH was recently sent to the penitentiary, for six months, in New York for selling fraudulent medical diplomas. It seems that this rascal had been operating his schemes very profitably for some time. The penitentiary is the very place for such animals, and the only regret that we now have is that his customers cannot be found and made to suffer just punishment. They go together, all equally guilty.

RATHER HARD ON LANPHEAR.

THIS piece is taken from the Texas Health Journal, and I will say in parenthesis that this journal says just exactly what it believes, whether good or bad :

This fellow, Lanphear, who advertises that he will go round over the country "doing operations," succeeded by his brazen effrontery in hooking on (in his mind) to a course of lectures to be delivered at Chicago this summer by Lawson Tait, Harrison Price, et. al. Those in charge of the arrangements very properly left Lanphear's name off the list; whereupon, Lanphear, the dirty little whelp that he is, rushes into print hankering for cheap notoriety. As a first-class liar, Lanphear takes the cake. In the International Journal of Surgery for June, here is what Lanphear, in boasting of himself, says: "My remarks will be based almost entirely upon my personal experience, which, in number and variety of cases, is more extensive than that of any other American surgeon." But for the fact that these words emanate from a traveling quack of Kansas City, they would, it would seem, be sufficient to cause the skeletons of departed American surgeons to turn over in their graves. Contemplate the emaculate gall of this small headed, big nosed quack of Kansas City claiming to be the greatest of all American surgeons. Is it possible that Professor Price, of Philadelphia, will ally himself with such cattle as Lanphear? However, it is very doubtful if Dr. Price or any other of the named gentlemen ever heard of this fellow Lanphear. Lanphear, in attempting to hook on to Lawson Tait, during his visit to America this summer can but remind one of the tick on the elephant's ear. Pass Lanphear around—on a chip.

A physician's library and instruments are exempt from execution. The insurance upon the same is also exempt. So says a recent Supreme Court decision.

THE SIGNIFICANCE OF THE BLACK-BALL.

THE following is taken from the Philadelphia Surgical Reporter: "The black-ball has become of too frequent use in our medical societies. There should be a profound sense of its significance; it is a measure of reproach and odium—often cast upon an honored name through unworthy motives.

Our medical societies are medical schools—and their teachings should be as free as the common light that enters through our windows. Our interests are common and not individual. The gradual operation of our many educational agencies will make the culture of the few, that of many, the truths of our medical science those of every physician's knowledge. These societies furnish helps and resources—open avenues for the investigation, discussion and development of the many complex questions of medical and surgical science. Closing doors to these institutions is narrow, selfish and un-American. It is resented by the spirit of a generous profession.

The very few fastidious, kid-gloved gentlemen who work their way into these associations for the prestige such membership may give them, need not fear contamination of their Lord Chesterfield manners or compromise of their personal or professional dignity by one who has crossed their professional paths and aroused their jealousy and prejudice or something worse. There is no rule of etiquette, professional or other, requiring that they should invite the more modest gentlemen to take a pretzel with them.

The black-balling class are usually men who will travel long distances to gratify a feeling of personal or professional revenge. Once informed or suspicing that the subject of their "royal disfavor" will be a candidate for membership of a particular society, they are on hand and actively engaged in a work of poisoning. They are unscrupulous as to means employed; they lose no time, spare no effort in bringing the ignominy, the opprobrium of defeat or rejection upon the candidate.

* * * "Now I have a shot at him—and I have canvassed and rallied my friends"—says the man with the black-ball. These societies should welcome into active membership every graduate of medicine.

There is no danger to be apprehended from weak men. They

will find their level, will learn through professional contact how very little they know and will be given some impulse in the direction of improving themselves in the science they profess to practice. The teaching they will receive will make them more efficient in their work—more fruitful in resource.

If such is not the one great central aim, the intent and purpose of all medical organizations, what is? If they are not great schools they fail of any useful purpose. A medical society to represent an ideal educational body, must be broadly democratic in its policy. The more democratic and broadly representative of the profession at large our societies are made, the earlier and more thoroughly will all charlatanism and quackery be stamped out. Frauds upon the profession avoid all danger of hard pounding—they skulk away from the light.

There are many grand men, masters in their profession, who are successfully persuing their calling about our country hills, and they are men whom a narrow, selfish and often a malignant policy keeps out of our medical and surgical societies. The lessons of these men's observations and experiences would be of value to a body of the ablest men of the profession. They are often men of high order of ability, thoughtful men, whose merits should be brought into public recognition.

The policy being persued by our medical societies is averse to their healthful growth and defeats the high end these societies were instituted to serve. They should in the fullest sense be representative of general medical development and not only that of a select, exclusive and limited class, a considerable element of which are small medical politicians whose chief ambition is to become a Grand Sachem or a Keeper of the Wampum Belt, and not that of advancing the art and science with which their names and interests are identified.

The self-respecting physician will not attend medical meetings unless he can attend in the honorable capacity of a member; nor will he seek membership in a society where there is a risk of his having the stigma of a black-ball cast upon his private and professional character by those low-motived men of the profession, who are indifferent to the significance of their act; who are so dead to the instincts and promptings of a high professional manhood that they frequently boast of their mean endeavor to besmirch the character

of a fellow in the profession. The motives too often governing in these cases are low, selfish, mean, unmanly, unprofessional and cowardly. And the men who use these honored bodies as avenues through which to serve some personal, selfish end, to gratify some vindictive feeling, personal pique or jealousy, deserve the severe and swift condemnation of the profession.

While much of our science, many of the procedures and great truths that enter into our medical and surgical practice are hereditary, they are not entailed upon any one or any select few of our great family of physicians. No one man can assume the purple and shaking his little wand say "All this is mine." We have eminent men in our American profession whom it is a professional and patriotic pride to honor; they are men who have gained their position by resolute devotion to study and research, and the value of the work of these men lies chiefly in their clinics, their teaching through our medical societies and journals, and the value of that teaching is enlarged as the constituency of our societies and journals is enlarged.

* * * * *

There are many men in our rural towns, along our country sides, among hills and mountains, who could teach some of our modern professors. We would have them brought into contact. It would be refreshing to see the blush of ignorance tint a tough cheek. The professor, the shining lights and the hangers-on of our medical societies need not in their own knowingness and because of their few advantages, hold their heads quite so high above the multitude. It is true that it cannot be expected that a man with diseased sight will see much merit in his humbler brother.

This black-ball business has gone quite far enough. We have medical journals, conducted by men of distinguished ability, men alive and devoted to every interest of the profession, and we hope they will have a strong word to say upon a matter that has become a reproach to the profession."

The above article contains many valuable truths and should be read by every physician in the United States. There is nothing so contemptible, mean, low-down, thievish, as black-balling through spite or envy. Any physician who, through some grudge or prejudice, blackballs a fellow-physician, will do anything—murder being a small affair.

BOOKS REVIEWED.

TREATISE ON GYNÆCOLOGY, MEDICAL AND SURGICAL. By S. POZZI, M. D., Professor Agregé a la Faculté de Médecine; Chirurgien de l'Hôpital, Lourcine-Pascal, Paris; Honorary Fellow of the American Gynæcological Society. Translated, with additions, by BROOKS H. WELLS, M. D., Lecturer on Gynæcology at the New York Polyclinic. Vol. I. and II. New York; William Wood & Co., 1891.

The first Vol. of Pozzi's Gynæcology is a large book of 581 pages and includes the results of many years of experience of the author and represents the actual state of gynæcological science and art as it is understood and taught to-day. The author's fame as a gynæcologist is widely known. Volume I. treats of Antisepsis and the general principles of gynæcology, of metritis, fibroma of the uterus, carcinoma of the uterus, deformities of the cervix and disorders of menstruation under as many separate heads. In its preparation the methods in vogue in other nations have been carefully studied and appreciated, making the work a representation of the present condition of gynæcology in all countries. While in the preface the author is not slow to extoll the merits of the French for their great and honored record in the advancement made in gynæcology, yet he is not sloth to mention others whose names carry with them fame, and who have been equally as great in the upbuilding of gynæcology. The work throughout is rich in illustrations and full page plates. In marked contrast to the gynæcological operating room of the Lourcine Pascal Hospital Dr. Wells has placed two beautiful colored plates of the gynæcological operating room in the Johns Hopkins Hospital. The anatomical descriptions of the female genital organs has been quite properly omitted, while the pathology of the conditions under consideration have been clearly and thoroughly stated. The added notes of the American Editor renders the work much more acceptable and valuable. The chapter on Metritis is beautifully illustrated and the operative treatment for fibroma of the uterus is described in detail, the author favoring the extra-peritoneal treatment of the pedicle. In the treatment of cancer of the uterus, vaginal extirpation is always advocated in which there is no contra-indication.

Vol. II contains 583 pages, and treats—1. Inflammation of the uterine adnexa; 2. Neoplasms of the uterine adnexa and ligaments; 3. Genital tuberculosis, intra and extra peritoneal pelvic hæmatocele, extra uterine pregnancy; 4. Diseases of the vagina;

5. Diseases of the vulva; 6. Malformations of the genital organs;
7. Diseases of the urinary tract, rectum and pelvis.

Each of these topics have been thoroughly and elaborately treated and profusely and beautifully illustrated. It has afforded me great pleasure to review these books and I can unhesitatingly say they are the best French gynecological works, and among the best English that have appeared in over twenty years. Dr. Wells is to be congratulated for his excellent work as well as the instructive plates he has added to it. The mechanical skill displayed in the general make up of these books reflects great credit on the publishers. In appearance they are two very handsome books and will add beauty to any library and impart information which is generally needed to all who read them.

A MANUAL OF ORGANIC MATERIA MEDICA, being a Guide to Materia Medica of the Vegetable and Animal Kingdoms, for the Use of Students, Druggists, Pharmacists, and Physicians. By JOHN M. MAISCH, Ph. M., Ph. D. Illustrated. Fifth edition. Philadelphia: Lea Brothers & Co., 1892.

The rapidity with which successive editions of this work have been exhausted is one of the strong proofs of its value and appreciation. This book certainly contains as much information upon the subject treated, in such limited space, as any book in the English language. The work has been classified under three headings: Animal Drugs, Celular Vegetable Drugs, and drugs without celular structure. They are then divided into their respective groups, such as stems, roots, barks, leaves, resins, etc., etc. One of the many interesting things about this valuable work is the manner in which the author has arranged the work—first the official name of the drug, then follows the English name or synonym, and in succession is given the origin, natural order, habitat, general description, with histological structure, substitutions, adulterations, constitution, properties and dose of the remedy. It is hardly possible to find a book in which the information is given in a clearer or more accurate manner than this one, and yet it is very brief. This is a subject that is neglected too much by the student and practitioner, and still 'tis just as important and should be as properly and carefully studied as is organic materia medica. The pharmecœpal drugs and those non-official drugs in general use have been indicated by placing the names in large type; this will render the book more valuable to the student. It is a good book in every sense of the word, and is gotten up in first-class style.

MODERN GYNÆCOLOGY, A Treatise on Diseases of Women, comprising the results of the latest investigations and treatment in this branch of Medical Science. By CHAS. H. BUSHONG, M. D., Assistant Gynæcologist in the Demilt Dispensary, New York; formerly attending physician to the Northern Dispensary, and assistant to the Vanderbilt Clinic, College of Physicians and Surgeons, New York. 8 vo., cloth, illustrated, pp., 389, price \$2.75. E. B. Treat, 5 Cooper Union, New York, Publisher, 1893.

This is a very excellent book on Gynæcology and embraces the most improved measures and recent methods of operation and treatment that come within the scope of and that can be of service to the general practitioner. The author states that this book is not written for the specialist but for the family physician, and there is nothing in the routine work of gynæcology that requires more skill than a case in general medicine. The instruments and appliances are few, and a knowledge of their use is readily acquired. He states that the effort of this book is to place before the physician a clear, common-sense statement of the symptoms of the various diseases of the female sexual organs, to indicate in brief the methods requiring the aid of a specially trained consultant of larger experience. The book opens with a fine chapter on physical examination; following this are the chapters on scanty menstruation, amenorrhœa, and metrorrhagia. Some of the chapters are briefly but very sensibly discussed. The chapter on uterine displacements is an excellent one, also that of metritis. It contains about 400 pages, beautifully illustrated, many of the illustrations having been drawn especially for the work. Taking everything into consideration, it will be of great value to the general practitioner.

CHOLERA: ITS CAUSES, SYMPTOMS, PATHOLOGY AND TREATMENT, by ROBT. S. BARTHOLOW, M. D., L. L. D., author of a treatise on the Practice of Medicine, of a treatise on Materia Medica and Therapeutics; of a Manual of Hypodermic Medication, of a Manual of Medical Electricity, etc., etc.

This little book could not have been written and given to the profession at a more opportune time when a great many are expecting Cholera and will be disappointed if its arrival is not early announced. It is possible that it may invade this country and if it should, the subject should be thoroughly studied before its arrival. The greatest teacher to man is that of experience and this book is the writings gathered from the experience through two epidemics by one of the most famous, widely known and successful physicians in the world—Roberts Bartholow. The work

opens with a short history of the disease, giving its native home in the densely populated malarial banks of the Ganges and Brahmaputra. The author says that "Here the alluvial soil, the humidity, the isothermal lines and the sanitary vices of an uncleanly and crowded population combine to form a suitable nidus for the germ of Cholera.

Following this interesting subject we read the 24 instructive pages devoted to its etiology. The symptoms of the three stages are clearly given but a large part of the book has been given to the treatment, not only his treatment has been given, but that of other eminent writers. The book is a most pleasant one to read, his style is smooth and easy and the language is simple. It is tastefully and substantially bound and beautifully gotten up, exemplifying the general character of Lea Brothers' books.

OUTLINES OF THE HISTORY OF MEDICINES AND THE MEDICAL PROFESSION. By JOHN HERMANN BASS, M. D. Translated, and in conjunction with the author, revised and enlarged by H. E. HANDERSON, A. M., M. D., New York. J. H. Vail & Co., 21 Astor Place and 142 Eighth Street, Cloth \$6.00.

It is scarcely possible to give this book anything like a review it so justly deserves. One does not, and cannot appreciate its magnitude, the scope of information it contains, the labor and time that have been spent in its skillful preparation until page after page is carefully read. The translator says in the beginning that his desire is "to present to the American medical profession a treatise on the history of medicine, neither so superficial and 'sketchy' as to disappoint, nor yet so voluminous and philosophical as to weary the reader." I can exclaim no doubt with the many readers of this book, that the translator's desire has certainly been fulfilled. The book opens with an interesting history from a medical standpoint of the Egyptians, Persians (Chaldeans), Babylonians, Assyrians, Syrians, and Medes, Phoenicians (Carthaginians), Jews, Indians, Chinese, Japanese, Cythians, Kalmucks, Siamese, Creeks, Turks, Romans and Arabians, describing fully the different methods these people resorted to in sickness, their absurdities and follies, affording to those interested in medicine very entertaining reading matter, and certainly valuable information. The history of Medieval medicine, Modern medicine and recent medicine are the subjects next treated. I notice the author claims for Egypt the greatest antiquity in medicine. The next division of the work

considered embraces the period from 1000 B. C. to the overthrow of the Western Empire in A. D. 476. The Græco-Roman medicine, and medicine under the Roman Empire are two interesting chapters. The chapter on Eclectics is a good one. Following this one is the one containing a galaxy of the brightest medical men for a period of three hundred years, and among this number as everybody knows Claudius Galen stands at the head. The Mystic and Magic in ancient medicine is a very interesting chapter while the descriptions of "Epidemics" during the closing ages of Antiquity portrays the horror of that period wherein the loss of life was so great that one of the church Fathers cried out: The human race is exterminated, the earth is returning to uncultivated waste. The next division of the work treats of medicine from the downfall of the Roman Empire to the discovery of America. At this place the author shows his power and greatness. This portion of the work is a masterpiece and can only be appreciated by careful reading. The history of Modern Medicine from 1492 to 1800 is next considered and is concise, yet a full account of the science during more than three centuries of its most active progress I notice that American physicians and surgeons are generously remembered and due credit given them for their noble work. American Gynecology is specially honored. Space will not allow further comment. The book contains 1775 pages and in conclusion I will say that it is the most scholarly, encyclopoedic and best book on the history of medicine ever presented to the profession.

MEDICAL CONSULTATION BOOK, a Pharmacological and Clinical Reference, designed for the Consultation Room, etc., by C. P. HACENBERG, M. D.

Works of this class are often of great service, but it is not a good plan to get in the habit of using them on all occasions. This book is mainly a work of compilation, and its contents are so arranged as to be available to meet almost any emergency in the practice of medicine and in rating the efficacy of drugs. In the preliminary observations of the work is presented a consideration of the nature of prescriptions and of the actions of medicines, giving the modern views thereon. In the therapeutics of the work there is a full list of the officinal and non-officinal drugs and medical remedies. The list contains 2,857 standard remedies, embracing largely modern therapeutics in condensed form and alphabetically arranged for convenience for ready reference. These formulas are authen-

ticated and have been gleaned from many medical works. They are classified to meet the treatment of all well known diseases in the human body. Some of the best prescriptions offered to the medical profession by the most noted authorities are found in this book. One important feature is the enumeration and systematic classification of all the remedies the book contains amounting to 10,243. Special attention has been given to the treatment of poisoning by active drugs, snakes, etc. The book closes with a full list of new remedies, representing their active principles and their posology with a good appendix. It is printed in solid brevier type, royal 8 vo. in size, well bound, containing nearly 800 pages, and is complete in one volume, price per copy \$7.50.

THE CHRONIC DISORDERS OF THE DIGESTIVE TUBE, by W. W. VAN VALZEH, A. M., M. D., formerly Demonstrator of Clinical Medicine in the Jefferson Medical College. New York: J. H. Vail & Co., 1893.

There is no class with which a physician has to contend that gives him more trouble, and none as unsatisfactorily treated, as those of the digestive tract. Patients who suffer from diseases of the intestinal canal are many and none are more constant callers, picturing to you their unhappy condition, and hence no class of diseases should receive more careful and studious attention. This book contains 151 pages and is divided into five chapters—General Therapeutics; Chronic Disorders of Gastric Digestion; A Clinical Study of Intestinal Indigestion; The Causation and Treatment of Chronic Diarrhœa and the Curative Treatment of Habitual Constipation. The treatment of each disease under consideration is full and complete. Among the many diseases of the alimentary tract that a physician is called upon to treat and the one that yields less frequently to remedial agents, chronic diarrhœa is the most frequent. The chapter on the treatment of chronic diarrhœa is very good indeed, being the curative treatment upon the etiological factors. The author of this chapter is a great believer in *Cascara Sagrada*. On the whole, the little book is quite complete so far as it goes. It is neatly gotten up and is a very instructive and attractive book.

THE CREATION OF GOD. By DR. JACOB HARTMAN. New York: The Truth Seeker Company, 1893. Cloth, 8 vo., pp. 432.

Many people like this kind of a book, and "for those who like this sort of thing, it is the very sort of thing they like." This

work consists of rash disputations against Judaism and Christianity, rabbis and priests, prophets and apostles, and the Bible. The author declares (without any conscientious scruples, so he says) that there is no God—just a little more than I can say, if I have read his book. This work is equal to any of this class; the author substantiates what he says the best he can. Some parts of the book are well written and show a great deal of thought. The few chapters devoted to the physical sciences are good. The book contains 432 pages.

Medical Expert Evidence.

The Society of Medical Jurisprudence of New York has recently been engaged in the discussion of the subject of medical experts' evidence. Dr. Landon Carter Gray read a paper on this topic at the April meeting, in which he said, in speaking of the prejudice against experts: "One way to remedy this evil would be to ask each medical expert, while on the stand, for his professional opinion of the other experts, but this plan would not do because of the cry of 'professional jealousy' which would be raised. Another way would be to show the competency or incompetency of an expert by a rigid cross-examination. Another plan would be to bring outside doctors to establish the reputation of the experts; but it would be difficult to get men to come forward and give the desired testimony."

He suggested the following plans: First, in trials not by jury, let the judge select one or more competent experts to sit with him on the bench in an advising capacity; second, in trials by jury, let the medical experts called on both sides hold a conference before the trial, so that they can agree on the facts from which they are to be asked conclusions.

Our readers will remember that this whole subject was gone over most exhaustively by the Medical Society of the County of Kings in 1891, and it seems to us that the conclusions then reached were the most sensible and at the same time the most practical solution of a most difficult problem. We are glad to see that the Society of Medical Jurisprudence had present at its meeting Hon. Willard Bartlett, who has studied the subject perhaps more than any other member of the legal profession.

Selections.

The Morrhuolines, or Alkaloids of Cod Liver Oil.

The most important active principles of the oil are the alkaloids, discovered in 1889 by M. Armand Gautier (Professeur a la Faculte de Medecine de Paris) and one of his students, M. L. Mourgues, (Professeur a Santiago de Chili.)

Further investigations made by M. Gautier in 1891 and 1892, on chemical and physiological lines, show that the principal bases of Cod Liver Oil are :

Amylamine,		$C_5H_{13}N$
Dihydrolutidine,		$C_7H_{11}N$
Oxycollidine,		$C_8H_{11}NO$
Morrhuine,		$C_{19}H_{27}N_3$
Nicomorrhuine,		$C_{20}H_{28}N_4$
Aselline,		$C_{25}H_{32}N_4$
Morrhuic Acid,		$C_9H_{13}NO_3$

the last of these, while having the properties of an acid, is at the same time, slightly basic.

The most abundant and most active of these principles are Amylamine, Oxycollidine, Morrhuine and Nicomorrhuine.

These alkaloids *have all a somewhat similar action on the economy*; in small doses they excite the activity of the nervous system and the intra-oxidization processes, they assist the digestive functions, stimulate assimilation and circulation, and purify the system of its impurities as is indicated by the enormous quantities of urine excreted under thier influence, the acceleration of the sudoral secretions and the increased appetite provoked.

Cod Liver Oil has always been known to produce these phenomena, but the experiments of M. M. Gautier and Mourgues, Laborde, Boillot, etc., on animals and on man, have established without doubt that these effects are especially due to the presence of the alkaloids of this oil. The value of this popular drug as a medicament therefore is fully confirmed and scientifically explained.

The discovery of these alkaloids has now passed the preliminary stage of laboratory experiment and in our laboratories at Neuilly, we have been able, by modifying and completing the indications laid down of M. Gautier & Mourgues, to extract them on an in-

dustrial scale, in a perfectly pure condition, as well as the principle salts of these bases. The following are exhibited for the first time :

AMYLAMINE.—(*Special to Cod Liver Oil.*)

Free base,		$C_5H_{13}N$
Hydrochlorate,		$(C_5H_{13}N) HCL$
Hydrobromate,		$(C_5H_{13}N) NBr$
Bitartrate,		$(C_5H_{13}N) C_4H_6O_6$

DIHYDROLUTIDINE.—

Free base,		$C_7H_{11}N$
Bitartrate,		$(C_7H_{11}N) C_4H_6O_6$

OXYCOLLIDINE.—

Free base,		$C_8H_{11}NO$
Hydrochlorate,		$(C_8H_{11}NO) HCL$

NICOMORRHUINE.—

Free base,		$C_{20}H_{28}N_4$
Hydrochlorate,		$(C_{20}H_{28}N_4) 2HCL$

MORRHUINE.—



The observations and experiments made on man and animals, show that in view of their great activity, the salts of these alkaloids given hypodermically or by the stomach should not be administered to an adult human being in doses exceeding five to twenty centigrammes daily.

Morrhul is an alcoholic extract of Cod Liver Oil, which contains *all these alkaloids* and other useful principles essential to the complete therapeutical effects of the oil.

The Kansas Way.

The following appears at the foot of a billhead of a Kansas physician. It is unique, original, and pointed, and we presume effective : "A prompt settlement of this bill is requested. If bills are paid monthly, a discount of ten per cent. is given. Bills not paid promptly will be passed to my attorney for collection. If you pay your physician promptly he will attend you promptly, night or day; rain or shine, while your slow neighbor suffers and waits, as he made the doctor wait, and while he is waiting the angels gather him in."—*Kansas Medical Journal.*

The Treatment of Suppurative Buboës.

Otis (Journal of Cutaneous and Genito-Urinary Diseases, vol. vi, No. 5) treated sixteen suppurating buboës according to the following method. The skin for some eight or ten inches about the affected area was rendered thoroughly aseptic by scrubbing with green soap, washing with sulphuric ether, and then douching with a solution of mercuric chloride 1 to 1000. A narrow bistoury was then inserted into the abscess cavity, and the contents gently but thoroughly squeezed out. The cavity was irrigated with a solution of mercuric chloride 1 to 2000, and immediately filled to moderate distention with warm iodoform ointment (ten per cent.), care being taken not to use a sufficient degree of heat to liberate free iodine. The syringe used for introducing the ointment was the ordinary cone-pointed, glass, clap syringe. The plunger being removed, the barrel, gently warmed in the flame of an alcohol lamp, was filled with the ointment by means of a spatula, and the plunger replaced. On finishing the injection, at the instant of withdrawing the syringe from the wound, a compress wet with cold bichloride solution was applied, which instantly solidified the ointment at the orifice, preventing the escape of the contents of the abscess cavity. A large compress of dry bichloride gauze was then applied, covered by a protective dressing of cotton, and retained by means of a firm spica. The patient was requested to return at the end of four days. If all was well at this time, the dressing was simply reapplied; but if there were any evidences of inflammatory action, the wound was thoroughly irrigated and cleansed, and the injection repeated.

The advantages claimed for this procedure are—

1. It is simple and safe.
2. In suitable cases cure, as a rule, seems to be more rapid than by any other method.
3. The patient is not prevented from going about during treatment.
4. The first gland being rendered thoroughly aseptic, renders it less likely that other glands in the chain will become infected (?)
5. It leaves no tell-tale scar.
6. It in no way interferes with the performance of any subsequent surgical procedure, if such should be deemed advisable.

In Otis's cases, as a result of this treatment, nine were cured in six days, three in twelve days, one in fourteen days, one in twenty-three days, and two deserted during treatment.—*Gazette*.

"Cerebrine" in the Treatment of Locomotor Ataxia.

Dr. Græme M. Hammond presented a case of locomotor ataxia which he had been treating with hypodermic injections of cerebrine. Six years ago the patient, a man aged 40, had begun to suffer with double vision. This, after several months of treatment, had disappeared and for a time he had been quite well. Then the typical symptoms of locomotor ataxia came on. There was complete loss of the jerks; he had sharp pains in his legs; the ataxia gate was well marked; there was inability to stand with the eyes closed, even when the legs were some distance apart; he had difficulty in evacuating his bladder and bowels; his sexual power was lost; and he had a sense of constriction around the waist. There were no eye symptoms. The man denied syphilis. Treatment was begun about ten weeks ago, and consisted of a daily hypodermic injection of cerebrine, five minims, combined with five minims of water. Dr. Hammond said he presented the case with some diffidence, on account of the method of treatment employed; no one had had less faith in these animal extracts than himself. The improvement in this case, however, had been very marked. The man's sexual functions had been perfectly restored, he had complete control over his bladder and bowels, the sharp pains had disappeared, his general health had improved, he was able to run up and down stairs, and could stand fairly steady with his eyes closed. The knee-jerks, however, had not returned. No other treatment had been employed. The improvement had been gradual and steady, and had begun about a week after the first injection. The cerebrine employed was that prepared by Dr. Wm. A. Hammond.

Dr. Joseph Collins had employed subcutaneous injections of cerebrine, as prepared by Dr. Paul Gibier, in a few cases of locomotor ataxia; the improvement in those cases had been about equal to that in Dr. Hammond's patient. It was not uncommon, he said, to see the virile powers return in these patients; this had occurred after applying blisters to the back. A case had also been reported in which the shooting pains had disappeared after injections of phosphate of sodium.

What Becomes of Medical Graduates in the United States.

We lately noticed the fact that after a medical education, in many cases not exceeding eighteen months in duration, over 4,000 medical graduates are turned out of the medical schools of the United States (*Lancet*). It is almost satisfactory to learn from a correspondent of the *Medical Age* that a large proportion of these fall out of the profession, or never really get into it. The writer traced after graduation 100 of his friends, especially in the first five years, and found that 75 had to resort to other employment; 23 received a salary either additional to practice or to separate therefrom; 15 became proprietors of drug stores; 5 were insurance agents; 4 "loaned money;" 1 sold real estate; 1 was an agent for drugs; 1 an agent for books; 1 deals in patent medicines; 2 were farmers; 1 a manufacturer; 2 gave massage treatment; 1 sawed wood, and subsequently suicided (*sic*): 12 gave up in disgust, and 1 never tried to practice at all—29 graduates only in 100 devoted themselves to medicine, of whom 11 associated themselves with other practitioners, and in some cases succeeded to their practice.—*Ex.*

Congestive Headache.

Dr. John Kercher, Chicago, Ill., says: I have been using Peacock's Bromides with good results. Used it in several cases of persistent headache, with entire satisfaction to the patient and myself. It is not indicated in all forms of headache, but in the most frequent (the congestive), in which cases I have used it, it acted with very satisfactory results. I have also treated a case of epilepsy (now under my care) for five months. Used to have attacks nearly every day, has had three in one day while in my care. The patient has been using Peacock's Bromides about four months, and has not had an attack in over three months.

Dr. Emmet (New York Gynæcological Journal) says of Dr. A. H. Stevens that he opposed the first case in which at the Woman's Hospital Dr. J. Marion Sims proposed to open a woman's abdomen and remove a fibroid. He believed that the Doctor could do the operation successfully, but he said that it would induce every young doctor in the land to open the belly of every young woman to see if she had a fibrous growth. A prophet surely.

Good Cause for Suicide.

William Harman, a resident of Titusville, Pa., committed suicide a few days ago from a melancholy conviction that he was his own grandfather. Here is a singular letter that he left: "I married a widow who had a grown-up daughter. My father visited our house very often, fell in love with my step-daughter and married her. So my father became my son-in-law and my step-daughter my mother, because she was my father's wife.

"Sometime afterwards my wife had a son; he was my father's brother-in-law and my uncle, for he was the brother of my step-mother. My father's wife, i. e. my step-daughter, also had a son; he was, of course, my brother, and in the meantime my grandchild, for he was the son of my daughter. My wife was my grandmother, because she was my mother's mother. I was my wife's husband and grandchild at the same time, and as the husband of a person's grandmother is his grandfather, I was my own grandfather.—*Montreal Medical Journal*.

What Is an Expert.

The Supreme Court of Illinois gives a definition of a medical expert which is so matter-of-fact that we take pleasure in reproducing it for the benefit of our readers. The Court says: "A practicing physician who is shown to be a graduate of a regular college and to have practiced his profession for many years, is competent to give his opinion upon a hypothetical question, setting forth the symptoms of a deceased person, whether the death was from the effects of arsenical poisoning, although he may not be shown to have had any case of such poisoning. A medical witness, in giving his opinion as an expert, is not confined to opinions derived from his own observation and experience, but may give an opinion based upon information derived from medical books."

Plaintiff's Attorney—"I've an expert who will swear that he is insane."

Defendant's Attorney—"I've an expert who will swear he is of sound mind."

Plaintiff's Attorney—"Then let's pair off on experts and save that much money."—*R. I. M. S. M.*

Salophen.

When the preparations of salicylic acid were first in medical practice it was thought a specific had been discovered for the treatment of rheumatism. As time passed it was found that the salicylates failed to meet all the requirements of an anti-rheumatic; they frequently caused disturbances of the stomach, nervous disorders, irritation of the kidneys and weakness of the heart. Accordingly, when salol, the phenol-ether of salicylic acid, was brought forward by Sahli as a substitute devoid of these disagreeable effects, it met with ready acceptance by the profession, but it was soon found that owing to the quantity of carbolic acid in its composition salol gave rise to carbolic acid poisoning in some cases, if employed in larger doses. To obviate these toxic effects a new body was constructed in which the phenol element of salol is replaced by an innocent substance, and to this resulting compound the name Salophen has been applied.

Phytoline—What It Is, Dose, Etc.

Phytoline is no compound or secret preparation; it is a remedy prepared from the active principle of the *Phytolacca* Berries, after having been touched by the early frost. After much experimenting, the Walker Pharmacal Company, of St. Louis, have at length been enabled to put on the market a preparation of the *Phytolacca* Berry which retains its strength in any climate. The alkaloid is simply retained by a process of sun-distillation suggested by Prof. W. W. Baxter.

Phytoline may be given in ten drop doses six times a day, before and after meals. It is by far the most concentrated preparation of *Phytolacca* in the market. Each ounce representing in strength thousands of berries. Therefore, in prescribing ten drops six times a day, you get the physiological effect of the drug, and may depend upon reducing your patient from five to thirty-five pounds per month; no evil after-effects whatever resulting from the treatment. It is a powerful anti-fat, yet absolutely harmless.

Masturbation, according to Prof. Parvin, is of rare occurrence in the female sex, the percentage being only about three-tenths of one per cent., whilst among the male sex it is about three per cent.

Trional as a Hypnotic.

In the "Neurologisches Centralblatt," Nov. 25, 1892, Dr. Brie, of Bonn, gives an exhaustive account of his experience with this recent addition to our therapeutic armamentarium.

He describes Trional as a white powder similar to Sulfonal. It is difficult to solve in water at the ordinary temperature, but is easily soluble in hot water and in alcohol and ether. The watery solution has a slight bitter taste. He had used it in forty-two cases of insanity, about 300 doses having been administered of one to three grammes. It was dissolved in hot water and given a half hour before retiring. As a general rule, sleep followed within an hour. According to the results of his numerous observations, Trional possesses an extraordinarily favorable influence. It should be the first drug mentioned and recommended as a hypnotic. It is almost tasteless; it is easily administered; acts rapidly, and after effects are rarely manifested. Its use is indicated in simple insomnia and also in the sleeplessness of insanity, associated with restlessness and marked excitement.

Trade Journals.

We note that the indignation against trade journals is increasing. Daniels' Texas Medical Journal, in an able and scathing editorial, sounds the key-note. In prophetic words it seals the doom of these leeches of legitimate medical journalism. Who will take up the task next? Not a word yet have we heard from the West. Would it not be well for some of our brother editors of the "wild and woolly" West to use a little space in the direction of trade journals with good results? The medical profession only need educating a little when the time will speedily arrive when such journals will not be able to live. Take it up and sound the note. —*New England Med. Monthly.*

The Tilden Company have evidence that unscrupulous houses are sending out various preparations in lieu of the genuine Elixir Iodo-Bromide of Calcium Comp., of which they are the exclusive manufacturers. The profession are requested to examine the label carefully so as to be sure that they are receiving the genuine product.

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The Ideal Nurse.

There are few ideal things or persons, so that we are interested to keep in mind such as we may discover. In some reminiscences of the New York Woman's Hospital in the New York Gynæcological Journal, Dr. T. Addis Emmet says of Margaret Brennan, a nurse at the hospital: "She was a most remarkable woman; one who, I believe, contributed more in her way, by her tact and good sense, to the success of the hospital than any other individual ever connected with it. She could neither read nor write—a want which very few people recognized in her—and yet in over thirty years of service she was never known to have made a mistake or forgotten an order. Much that has now passed into our common stock of knowledge in the detailed care of patients while under treatment and other plastic operations, particularly in the care of cases of vesico-vaginal fistula, we owe to the observation and judgment of Margaret Brennan, who was the pioneer nurse in this specialty. Her great tact was shown in attending strictly to her own business, and in seeming to know nothing of the business of others about her. She was always cheerful, and exerted a most beneficent influence upon the patients in keeping them encouraged and contented with what was being done for their relief. Without ever committing herself, she impressed each patient with the conviction that the surgeon in charge of her special case was the most skillful. She certainly had her favorites, but in her loyalty to the institution she never let those who were not so see any indication of her preference. Her whole life was moulded by an earnest desire to discharge her duties, and she discharged them through the love of God. Few about her ever realized what the incentive was which actuated her to spend a life of unselfishness which was devoted, almost to the last, in serving God through her care of others. She was strong in the belief that she had been sent into the world for this special purpose, and she was firmly convinced that her reward was in proportion to the manner in which she availed herself for good of the opportunities given her. No one knew her so well as I did during so many years, and often under the most trying circumstances, and I am sincere in my belief that her reward after death was great after so well a spent life."

Words could add nothing to this picture of the ideal nurse. Its drawing by so competent an artist as Dr. Emmet renders it far

more impressive. Doubtless many others have lived but failed to find such a physician to appreciate their worth. However, it is a picture that every person would be wise to keep close to the heart. Lives built upon that model always succeed, judged by the highest standards.

A Gentleman.

A gentleman should be the epithet applied to every physician. The unwritten code which stamps a gentleman is stronger than any Code of Ethics and it is certain that the latter will never create one unless it be in him to be one spontaneously. As one of our cotemporaries has loudly asked for the definition of a gentleman we cull the following from a paper by Dr. T. B. Greenley (*Am. Pract. and News*), as a partial answer to his inquiry: In speaking of a physician as a gentleman I do not mean simply a finely dressed man, nor go so far as to claim he should be a Chesterfield in manners, nor a Beau Brummel in dress, nor even a fantastical Alcibiades, with his canine follower, but in every respect a gentleman in the true acceptation of that term. Of course the term has various significations, according to the country you may be in or speaking of. In this country it means a man of good manners, pleasant address, social disposition, and an honest man. But a physician should possess more than these qualities; he should be a man of kind, sympathetic feelings, and liberal in character. We might cite as a fair sample a man of our own guild, the celebrated and venerable Autocrat of the Breakfast Table, Dr. Oliver Wendell Holmes.

In England the term gentleman has a different signification from what it does with us. In that country it means a member of the aristocracy, with but little regard to his personal qualities.

A physician, however, should occupy a high plane in the community in which he lives, and so conduct himself as to be worthy not only of the confidence of his patrons as a physician, but also an example for his neighbors to imitate. He should, if possible, be well informed on most ordinary subjects, especially such as his friends are interested in, and thereby be able to render advice and instruction when called on.

As a rule the family doctor is looked up to as a man who should

know something of almost everything, and is frequently asked for information on various subjects. In a few words, the doctor should not be a fool on any subject.—*Review.*

Kumysgen.

Regarding this valuable nutritive preparation, Dr. John V. Shoemaker says (Medical Bulletin): "Kumysgen possesses a number of advantages which will, as a rule, cause it to be preferred to the bottled liquid as formerly sent out. It is a powder, and is therefore readily transported; the beverage can be made from the powder in a minute or two by the addition of water and shaking for a minute; the casein of the powder is in a finer, and consequently, more digestible state. As a corollary from the last statement, the liquid made from the powder is generally preferred by the invalid.

"Kumysgen exercises a stimulating influence upon the peptic glands and the appetite improves under its use. It promotes the action of the kidneys, and in the colder season of the year has a diuretic effect. In summer it favors diaphoresis. Kumysgen has a tonic action upon the muscular system in general, and the heart in particular. The pulse becomes stronger and more frequent, and the respiratory acts are deepened as the result of taking kumysgen. It increases the proportion of fibrin and hæmoglobin in the blood, and causes a gain in flesh and weight.

"From its combination of nutrient and stimulant properties, kumysgen is a very valuable addition to our dietetic and therapeutical resources. It is grateful to the stomach and allays vomiting; it is easily digested and absorbed; it is a reconstituent in conditions of prostration, whether due to loss of blood, to exhausting discharges, to chronic pathological processes of infections, or to febrile conditions. This succinct statement opens to view a wide field of utility."

The Largest Microscope in the World.

An object of interest at the Columbian Fair will be an enormous microscope which is now being constructed in Munich. It will magnify 11,000 diameters, and the instrument will cost nearly \$10,000. For the purpose of illuminating the images, which will be projected upon a screen, an electric light of 11,000 candle power will be used.

Everybody Has Seen Her.

Do you know the doleful person ? asks the Omaha World Herald. She, for the doleful person is almost always a woman, is always a good neighbor in health, and tries to be neighborly in sickness. But she makes a miserable failure at the latter. You know how she acts. Don't you remember the last time the baby was sick ? After you had watched by the little one's bed day after day and night after night, and watched the roses fade from the little one's cheek, and saw the little one's form waste away ? And don't you remember how she tried to cheer you up with a one-sided conversation, something like this :

"Why, Mrs. B——, how much worse the baby looks this morning. She looks just like Sarah Jones' baby did the night before it died."

"Gracious ! I never saw a child so wasted away as Sarah's was, except yours. We just done everything for the child, but it wasn't no use."

"I never will forget how Sarah took on at a funeral !"

And the doleful neighbor suddenly remembers that she has to run back home to "set a sponge," and when she goes you hope she will never return. You look again at the suffering babe and feel that your heart must surely break.

But suddenly there is a knock at the door, and in comes the—well, sun-beam neighbor, is as good a name as any. She was over the evening before and quietly and unobtrusively helped to do so many needful things, and when she left, she left a word of cheer. And when she comes this time she says something like this :

"Why, how much better the baby looks this morning !"

And don't you remember what a bright gleam of hope crossed your mind ?

"I never saw a child improve so much in so sort a time before. I am sure the baby will soon be well."

And then the sun-beam neighbor re-arranges the bed, adjusts the blinds, tells you she will call again in a few hours, and hurries home.

Honest, now, didn't she leave a confident feeling behind her ? She felt better and more hopeful. Baby, even, seemed to rally under the words ; and when at last the little one was playing

around your knee again, didn't you think of the words of the sun-beam neighbor?

The doleful neighbor has frightened more mothers to death, buried more babies and caused more tears than all the plagues combined.

She should be suppressed.

Salol in Asiatic Cholera.

Dr. Ivan I. Piatnitzky, of St. Petersburg, recommends (St. Petersburg Inaugural dissertation, series of 1892-93, No. 8, p. 97) the treatment of cholera by internal administration of salol, in five grain doses (for an adult) repeated hourly as long as required by the necessities of the case given. The drug is said to rapidly mitigate all choleraic symptoms, or even to cut short the disease. According to the author's experience, when employed in the suggested manner, salol proves to be "entirely harmless (Sovershenno Bezvreden)." [Cft. Volkvitch's paper on the same subject in the St. Louis Medical and Surgical Journal, March 1893, p. 166, and Volanski's, *ibid.* June, p. 367.—*Reporter.*]

A "Swipe" at Chicago.

Dr. Kauffman has changed the name of his weekly medical newspaper to the Chicago Medical Bulletin, stating that he was unaware of the existence of Dr. Shoemaker's journal. Now we feel better, since we know that ignorance of matters medical in the small portion of earth still unannexed to Chicago is characteristic of that city's doctors. Recently, a Dr. Cesna, of Chicago, inquired if there were such a journal as the Times and Register. Wake up, you hoosiers! Here's the World's Fair right on you, and you're not awake yet! Talk about Philadelphia's sleepiness—it is tetanic hyperesthesia beside some of these Chicago people.—*Times and Register.*

Had Authority For It.

Pastor—My dear, you should not dance. It is very wrong.

Young Belle—But I know one of the saints who approves of it.

Pastor—Impossible! Who?

Young Belle—St. Vitas.

The Lady With the Horse Mane.

Under this name a young girl, aged 20, is now traveling about the world, showing to the public how richly Nature has endowed her with the ornament of hair. She has, besides a rich *chevelure*, a mane growing out of the spine. The hair of this mane is of the same dark-brown color as that of the head, and reaches a length of about ten inches. The place where the hair grows extends downwards for 7 inches from a point 8 inches below the hair of the head, in the middle of the spine. Not long ago this lady with the mane was presented to the anthropological Society of Berlin, and Virchow, to her great astonishment, found that it was a pathological case, for behind the mane there was a *spina bifida occulta*. Several cases have been described during the last two years of hypertrichosis of some region of the spine, connected with *spina bifida occulta*.—*Review*.

A Successful Remedy in Treating Obesity.

BY A. SANDFORD, M. D., Everett, Mass.

For several years I have been on the lookout for some preparation which would reduce flesh without injuring the general health, but have never succeeded in finding one. Several weeks ago, however, I received a pamphlet, on the action of Phytoline (the active principle of the berries of *Phytolacca Decandra*) in obesity, and about that time a patient applied to me for a reduction in her weight. I prescribed Phytoline, and directed her to take ten drops before and after the three daily meals. She has now taken about two weeks' treatment, and tells me to-day that she has lost fifteen pounds, and that, too, without making any change in her diet, or affecting her general health. I am pleased with the results, and can conscientiously recommend it.—*Extract from Med. Brief*.

A Georgia Editor Wants His Money.

The following from the pen of a Georgia editor, who evidently has strong feelings on the subject: "The wind bloweth, the water floweth, the farmer soweth, and the subscriber oweth, and the Lord knoweth that we are in need of our dues. So come a-runnin' ere we go a-gunnin'; we're not funnin'; this thing of dunnin' gives us the blues."—*Ex*.

Physicians who have been disappointed in the use of favorite Prescriptions have the remedy in their own hands. Prescriptions and orders should read "Wm. S. M. Chem. Co."

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produce symptoms closely resembling delirium tremens.
patients become delirious.
dangerous to human life.
have to be watched and not to be trusted.
retard convalescence.
should not be administered internally, however much they may have been dialized or purified.

Order and Prescribe ☞ { ACID SALICYLIC—True—MERRELL.
SODIUM SALICYLATE—True—MERRELL.

FLUID HYDRASTIS.

A solution of definite strength and reliability, representing all the valuable constituents of the drug—the offensive and irritating resins being rejected. The only perfect representative of the drug in the fluid form within reach of the medical profession. Though often attempted it has never been successfully imitated. Send for our pamphlet on "Hydrastis and its Preparations."

The Wm. S. Merrell Chemical Co.,
Manufacturing Chemists,

96 Maiden Lane,

Laboratories,

A. J. Conner & Co.

New York City.

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And Wholesale Druggists throughout the United States.

Anderson Antiseptic Vaginal Capsules

FOR THE LOCAL TREATMENT OF

DISEASES OF THE VAGINA AND UTERUS.

The most efficient and cleanly means of introducing remedies into the vagina. Antiseptic, perfectly soluble and reliable. Each capsule contains an absorbent tampon which may be medicated with any remedy indicated.

WHEN?

In all cases of acute and chronic inflammation of the lining of the womb, gonorrhoeal syphilitic, purulent and leucorrhoeal discharges.
Relaxation of the uterine ligaments and weakening of the vaginal walls.
Falling of the womb. Ulceration of the os uteri.
Disease of the ovaries and fallopian tubes.
Painful and scanty menstruation.
Where the womb is extremely irritable and neuralgic.

HOW?

Moisten the tampon with the remedy, draw it back into the capsule by means of the linen thread, replace cap and insert.

WHAT?

The result is a grateful relief to the sufferer and satisfaction to the physician. No handling of disagreeable drugs; no loss of medication in the introduction, no soiling of linen.

THE VERDICT!!

RATIONAL.

CONVENIENT.

CLEANLY.

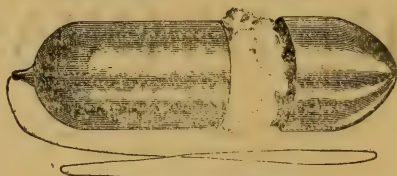
EFFICIENT.

Three Sizes.

No. 1 Small

No. 2 Medium

No. 3 Large



Tampon.

Absorbent Cotton,
Oulo-Kutun (Wool
and Cotton) or Wool,
as desired.

Exact size of No. 2 Capsule.

Any size by mail postpaid on receipt of price, 60c. per box.

VALUABLE AS A PIERRY.

Extract from a letter from Dr. A. J. Howe, Professor of Surgery, Eclectic Medical Institute, of Cincinnati, O.

"The Anderson's Vaginal Capsules charged with tampons of Oulo-Kutun are a convenient vehicle and medium for introducing douches or medicated fluids into the vagina, and retains them there. Astringent, sedative and antiseptic liquids may be thus employed, instead of the syringe as an implement, or a speculum."

Respectfully,

A. J. HOWE, M. D.

Send for printed matter containing valuable information.

THE HALL CAPSULE CO.

Manufacturing Chemists.

CINCINNATI, OHIO.

Have you seen our "Ruby Capsule" for disguising the physical appearance of prescriptions, and for use when two medicines are to be taken in alternation? Send 10c. for trial box of 100.

Abstracts.

Contract Practice in Connecticut.

The Hartford Courant states that the Medical Society of the Central District of Connecticut has declared itself opposed (very properly, we should say) to the principle of the contract system as applied to medical practice. The growth of this system appears to have been great during the last few years. In Hartford alone there are said to be twenty co-operative organizations that provide their members with medical attendance for fees ranging from fifty cents to three dollars per annum. In regard to one of these societies, whose secretary conceived the idea of getting the contesting physicians to bid against each other, it is stated that he finally obtained the services of "a doctor in good standing" who would accept a fee of thirty-eight cents a head per annum. The remuneration is held to be only a small part of the advantages reaped by the contracting physician, for the reason that his connection with a large society brings him into relation with a large "outside practice;" and if at any time the contract becomes irksome, the incumbent is likely to find no difficulty in securing a successor.

Parke, Davis & Co. have just issued, for gratuitous distribution to inquiring physicians, two valuable brochures, one entitled "Acometric Syllabus" and the other "Biologic Therapeutics."

The first named work embraces 42 closely printed pages giving diseases, and indications in each, which may be met by the use of Diurnules and Diurnal Tablet Triturates. It will be of much interest to practitioners requiring a system of medication involving the most certain remedies in the minutest form.

Under the head of "Biologic Therapeutics," are furnished reprints of the lecture of Hector W. G. Mackenzie, M. A., M. D., (England) on "The Treatment of Myxœdema and other Diseases by the use of certain Organic Extracts," also an illustrated paper by Edward Carmichael, M. D., Edinburgh, on "Cretinism treated by the Hypodermic Injection of Thyroid Extract and by Feeding," besides excerpts from prominent medical journals upon the use of the Thyroid gland in therapeutics.

Either or both of these pamphlets will be mailed free to any physician applying to Parke, Davis & Company, Detroit, Mich.

Some Antivivisection "Poetry."

A Sheffield surgeon, as well known for his gentle nature as his professional skill, but who at one time had publicly upheld the advantages derived from experimental research, received the following on a post-card (Sheffield Medical Journal):

"TO THE DEMON TORMENTOR OF DUMB ANIMALS.
 "Polluted man how vile thou art
 Fiendish beyond the power of words to tell
 Half-witted elf, vile tortures to defend
 From thee I turn in horror and disgust
 Oh, thou degraded mass of animated dust
 Remember that indignant heaven thy doom hath said
 Damnation on thy guilty head."

Since the surgeon in question, like the farmer, in "Before the War," "spake him never a word," surely the author entirely deserves the title of "Demon Tormentor of a Dumb Animal." She should also remember to punctuate what she is pleased on insufficient grounds to consider poetry.

Iodide of Strontium.

While the salicylates answer all purposes in acute rheumatic fever, they are of little value in the non-febrile forms. Two such cases have been under my care during the past winter. As long as they took sodium salicylates in full doses, the symptoms were reduced to a minimum, but immediately returned on the discontinuance of the drug, which, moreover, had a deleterious effect on the health. I then directed these patients to take the solution of Strontium Iodide (Paraf-Javal,) beginning with four drachms daily. Improvement followed, and the dose was gradually reduced to one-half. The effect was very good; the symptoms gradually subsiding while the general health improved. Both patients resided in damp houses; and the rheumatism showed a tendency to recurrence, though at intervals much longer than when under the salicylates.—WAUGH, *in the Times and Register*.

The death of the chief of police of Chattanooga, Tenn., which occurred lately, is charged to an overdose of morphine, administered by his physician, Dr. R. L. Johnson, while under the influence of liquor. The doctor has been arrested on the charge of involuntary manslaughter and held to bail in \$1,000.

A Popular New Remedy.

There are few of the newer remedies that have met with more approval from the profession than has Pichi (*Fabiana imbricata*.) It has proved one of the most valuable of remedies in general vesical and genito-urinary troubles.

Pichi is diuretic; favors the expulsion of calculi and gravel, and relieves the irritation caused thereby; modifies favorably purulent discharges; and acts as a general stimulant of the excretory functions.

We make of this preparation the fluid extract, the solid extract, the powdered extract, and filled soluble elastic capsules.

The habitat of this drug is South America.

It is diuretic, tonic, terebinthinate. It calms irritability, and quickly modifies the urinary secretions in gravel and uric diathesis.

Among formulæ which have been prescribed in connection with fluid extract of Pichi with success, are the following :

R Fl. ext. pichi, $\mathfrak{z}$ ij.
Liquor potass, $\mathfrak{z}$ v.
Tr. nuc. vom., $\mathfrak{z}$ ij.
Elix. calisayæ, q. s. ad $\mathfrak{z}$ iv.

M. Sig.: Teaspoonful in hot water every four or five hours.

R Fl. ext. pichi, $\mathfrak{z}$ iss.
Glycerini, $\mathfrak{z}$ iv.
Elix. calisayæ, $\mathfrak{z}$ j.

M. Sig.: Teaspoonful in water every three hours till relieved, then three or four times a day.

R Fl. ext. pichi, $\mathfrak{z}$ ij.
Liquor potass., $\mathfrak{z}$ iv.
Glycerini, $\mathfrak{z}$ iv.
Elixir Calsayæ, q. s. ad $\mathfrak{z}$ iv.

M. Sig.: Tablespoonful in hot water every six hours.

R Fl. ext. pichi, $\mathfrak{z}$ j,
Potass. nitrate, $\mathfrak{z}$ j.
Simple elixir, $\mathfrak{z}$ iij.

M. Sig.: Teaspoonful once in two hours.

R Fl. ext. pichi, $\mathfrak{z}$ ij.
Fl. ext. hyoscyamus, $\mathfrak{z}$ ij.
Syrup, $\mathfrak{z}$ ij.

M. Sig.: A teaspoonful before each meal and at bedtime.

R Fl. ext. pichi, $\mathfrak{z}$ j.
Fl. ext. hydrangea, $\mathfrak{z}$ j.
Fl. ext; hyosyamus, $\mathfrak{z}$ ij.
Syrup, $\mathfrak{z}$ ij.

M. Sig.: A teaspoonful three times a day and at bedtime.

Therapeutic reports of its application, and full information con-

cerning our line of Pichi preparations, will be furnished on request to Parke, Davis & Co., who were the first to introduce the virtues of Pichi to the American profession.

Put a Strong Stick in It.

The drug store proprietor had employed a new boy for \$3 a week. "I'll have a little stick in mine," said the man at the soda water counter. "A litte what?" asked the boy. "A little stick," repeated the man with embarrassment. "In your soda water?" "Yes, of course." The boy prepared the mixture. The man took a swallow, gasped, gurgled, and coughed, and when he caught his breath, said, "What in thunder did you put in that soda water?" "Well, sir," replied the boy, "I wouldn't have done it if you hadn't insisted; but as long as you wanted it I gave you the best brand of mucilage there is in the shop."

Dr. C. W. Bates, of Hempstead, L. I., believes Caulocorea, properly and wisely used, prevents puerperal fever and many other of the accidents attending the lying-in woman. If the bowels are kept open for a week before the labor commences, by mild purgatives daily, and Caulocorea given in teaspoonful doses three times a day, it will benefit the labor, render it more natural, and prevent those long, lingering, tedious labors, so much dreaded by both patient and attendant. Caulocorea exerts a general tonic effect upon the womb and you do away with that nauseated feeling, and those terrible congestive headaches so often accompanying the lying-in woman. [It is manufactured by the Caulocorea Manufacturing Co., of Portland, Me., who will send a full-sized bottle free to any physician who will report results of its use.]

The Creator Knows.

"Doctor," said the patient, "I believe there's something wrong with my stomach."

"Not a bit of it," replied the doctor promptly. "God made your stomach and He knows how to make them. There's something wrong with the stuff you put in it, may be, and something wrong in the way you stuff it in and stamp it down, but your stomach is all right." And immediately the patient discharged him.—*Amer. Anal.*

Prophylaxis of Cholera Asiatica.

"I have been prescribing preventive medicine for diphtheria for many years, and have never had a second case develop. When diphtheria appears I have made it a constant practice to put all those exposed to infection upon Listerine, taken in drachm doses at each meal; and during the three years of la grippe I ordered my family and all my friends' families to use it after each meal, as long as there were any cases in our city. I did not once fail in preventing both diphtheria and la grippe when Listerine was taken faithfully. In several instances persons being called from home neglected the Listerine preventive treatment and returned in a week or two with la grippe fully developed. I believe that the only safe quarantine against cholera is to quarantine the alimentary tract, and for this purpose I shall trust to Listerine. It will prevent diphtheria and la grippe, and I feel sure it will prove equally efficient in the preventive treatment of cholera."—*J. H. Stringfellow, M. D., Prof. Hygiene, Northwestern Medical College, St. Joseph, Mo.*

In the New York Journal of Gynæcology Dr. Emmet tells the following of Dr. Francis, one of the old worthies in New York City. It seems that one of his patients, whom he had not suspected of being pregnant, sent for him when he was from home, so that another doctor had to be called. Greatly disturbed, he came to Dr. Emmet's office and exclaimed: "Damn these hoop-skirts! Young man, there was a time when I went to church that I could look around me and form some idea of what my income might be during the year. But now, since the invention of these damned hoop-skirts, I can no longer judge of the condition of the women. I am away from home when wanted, and some young whipper-snapper is called in and gets the case."

Symptoms.

The Wife—There is a prescription that the doctor left for you to-day when he called and found you out.

The Husband—How did he know what to give me?

The Wife—He said that from my appearance and symptoms he knew you were suffering from chronic dyspepsia.

A Hopeless Case.

Doctor—Madam, I may put your husband on his feet again, but I fear that he will never quite recover the complete use of his nerves.

Wife—Oh, dear, what has John been doing to bring on such an attack?

Doctor—He has confessed all to me. He tells me that yesterday he was rash enough to drink a cocktail that was made in a drug store.—*The Club.*

A practitioner devoting especial attention to the Diseases of children, says: "In the treatment of Choleraic Diarrhœa we are safe, it matters not at what time we may be called, in administering some antiseptic medication, something which will prevent fermentation, and have a destructive effect upon the septic germs more than likely present in the alimentary canal. Happy effects are often secured by the use of Listerine properly diluted; a favorite prescription is the following:

R Lambert's Listerine.
Glycerine (c. p.)
Syr. Simpl.
Aquæ Cinnamon, aa $\mathfrak{z}\text{j}$. M

Sig. Teaspoonful every one, two or three hours, as may be indicated.

Taking into consideration the component parts of Listerine, it impresses me favorably as a prophylactic and remedial agent for cholera, along with other intestinal disturbances. The eucalyptus, thyme, gaultheria and boracic acid which it contains are all antagonistic to germ life and oppose fermentation. The preliminary diarrhœa (cholerine, as it is called) may well receive teaspoonful doses of Listerine combined with the same amount of glycerine; in fact, I should be inclined to recommend to the laity this combination as a prophylactic measure."

Pepsin is undoubtedly one of the most valuable digestive agents of our Materia Medica, provided a good article is used. Robinson's Lime Juice and Pepsin, and Arom. Fluid Pepsin, we can recommend as possessing merit of high order. The fact that the manufacturers of these palatable preparations use the purest and best Pepsin, and that every lot made by them is carefully tested, before offering for sale, is a guarantee to the physician that he will certainly obtain the good results he expects from Pepsin.

THE BEST ANTISEPTIC
FOR BOTH INTERNAL AND EXTERNAL USE.
LISTERINE.

Non-Toxic, Non-Irritant, Non-Escharotic—Absolutely Safe, Agreeable and Convenient.

FORMULA.—LISTERINE is the essential antiseptic constituent of Thyme, Eucalyptus, Baptisia, Gaultheria and Mentha Arvensis, in combination. Each fluid drachm also contains two grains of refined and purified Benzo-boracic Acid.

DOSE.—Internally: One teaspoonful three or more times a day (as indicated), either full strength, or diluted, as necessary for varied conditions.

LISTERINE is a well-proven antiseptic agent—an antizymotic—especially useful in the management of catarrhal conditions of the mucous membrane, adapted to internal use and to make and maintain surgical cleanliness—asepsis—in the treatment of all parts of the human body, whether by spray, injection, irrigation, atomization, inhalation, or simple local application, and therefore characterized by its particular adaptability to the field of

PREVENTIVE MEDICINE—INDIVIDUAL PROPHYLAXIS.

LISTERINE destroys promptly all odors emanating from diseased gums and teeth, and will be found of great value when taken internally, in teaspoonful doses, to control the fermentative eructations of dyspepsia, and to disinfect the mouth, throat and stomach. It is a perfect tooth and mouth wash,
INDISPENSABLE FOR THE DENTAL TOILET.

DISEASES OF THE URIC ACID DIATHESIS.

LAMBERT'S LITHIATED HYDRANGEA.

RENAL ALTERNATIVE—ANTI-LITHIC.

FORMULA.—Each fluid drachm of "LITHIATED HYDRANGEA" represents thirty grains FRESH HYDRANGEA and three grains of CHEMICALLY PURE Benzo-Salicylate of Lithia.

Prepared by our improved process of EXSOLUSION, it is INVARIABLY of DEFINITE and UNIFORM therapeutic strength, and hence can be depended upon in clinical practice.

DOSE.—One or two teaspoonfuls four times a day (preferably between meals.)

Close clinical observation has caused Lambert's Lithiated Hydrangea to be regarded by physicians generally as a very valuable Kidney Alternative and Anti-lithic agent in the treatment of

Urinary Calculus, Gout, Rheumatism, Cystitis, Diabetes, Hæmaturia, Bright's Disease, Albuminuria, and Vesical Irritations Generally.

REALIZING that in many of the diseases in which LAMBERT'S LITHIATED HYDRANGEA has been found to possess great therapeutic value, it is of the highest importance that suitable diet be employed, we have had prepared for the convenience of physicians

DIETETIC NOTES,

suggesting the articles of food to be allowed or prohibited in several of these diseases. A book of these Dietetic Notes, each note perforated and convenient for the physician to detach and distribute to patients, supplied upon request, together with literature fully descriptive of LISTERINE and LAMBERT'S LITHIATED HYDRANGEA.

LAMBERT PHARMACAL CO., St. Louis, U. S.

British, Canadian, French, Spanish, German and South American Trade Constantly Supplied.

University of the City of New York.

MEDICAL DEPARTMENT.

FIFTY-THIRD YEAR, 1893-94.

Special * Announcement.

The Session of 1893-94 will Begin Wednesday, October 4th, 1893.

Attention is called to the fact that the curriculum has recently been entirely remodeled and greatly improved. It now consists of a three years' graded course, divided as follows:

1ST YEAR.—Lectures and recitations from text-books on Anatomy, Physiology and Chemistry. Dissection and Laboratory work in Histology, Materia Medica and Chemistry.

2D YEAR.—Lectures on Surgical and Regional Anatomy, Experimental Physiology, Experimental Chemistry, Physics and Hygiene, and Materia Medica. Recitations from text-books on Pathological Anatomy, Practice of Medicine, Surgery, Materia Medica, Obstetrics and Demonstrations on the Manikin. Laboratory work in Pathology; Clinics in Bellevue Hospital and the College Building, on Medicine, Surgery and Gynecology.

3D YEAR.—Lectures on Practice of Medicine, Surgery, Obstetrics, Gynecology, Therapeutics and Pathology, with Autopsies. Bedside teaching in small classes in the Wards of Bellevue Hospital on Medicine, Surgery and Gynecology. Clinics in Bellevue Hospital and the College Building on Medicine, Surgery and Gynecology.

SPECIAL CLINICS.

OPHTHALMOLOGY.	LARYNGOLOGY.	PEDIATRICS.	VENEREAL DISEASES.
OTOLOGY.	ORTHOPÆDY.	SKIN DISEASES.	NERVOUS DISEASES.

Examinations are held at the close of each year. The marks received for proficiency in practical work in the Laboratory, Dissecting Room, etc., are added to the final examination marks in each corresponding subject.

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The College possesses a corps of 64 Professors and Instructors in its various departments; and in addition to well-equipped Laboratories and a Dispensary where 20,000 visits are annually paid, it offers to students exceptional facilities for practical instruction at the bedside in Bellevue Hospital.

F E E S .

For course of Lectures,	\$150 00
Matriculation,	5 00
Demonstrator's Fee, including material for dissection,	10 00
Final Examination Fee,	30 00

For further particulars and circulars, address the DEAN,

Prof. CHAS. INSLEE PARDEE, M. D.

University Medical College, 410 East 26th St., New York City.

Typhoid Fever.

At a recent meeting of the Practitioners' Society of New York, at the Academy of Medicine, a discussion took place between the prominent physicians present on the question of a milk diet in continued fevers. It was the general opinion of Drs. Beverly Robinson, A. H. Smith, Robert Abbe and W. H. Polk that an exclusive milk diet in typhoid, as was so generally advised by doctors, led to much harm. They all thought that such a diet prolonged the fever, and all reported cases in which convalescence at once set in on giving solid food. The objection brought up against milk was that it fermented and irritated the existing ulcers. It was shown that solid foods, if properly prepared, were not solid after leaving the stomach, and were in no condition, upon reaching the ilium, to irritate typhoid lesions. They claimed that a patient on a milk diet was hungry, and that hunger itself, being a form of pain, kept up the temperature; but that solid food properly given, relieved this pain, hence lowered the temperature. It was mentioned that in former days a patient who was to have his abdominal cavity operated upon was restricted to a milk diet for two days before and ten days after the operation, and that often disastrous results, which were attributed to shock and sepsis, were due to inanition. The foods that were suggested as a substitute for milk were stale bread, scraped meat, baked potatoes, bouillon, fermented milk, beaten egg, wine jelly and junket.—*Med. Age.*

The Ohio Medical Journal says: "The honest man cares but little whether there be a law or not, except for its restraining influence over those who might do him harm. When, therefore, a man or a journal sets up a howl against the Code of Ethics, it reflects very seriously upon the morality of the howler. If the medical profession is antiquated because of its code, then may the same criticism be urged against all forms of government—a criticism that appeals only to the anarchist. Let him who is opposed to the Code of Ethics go where he belongs—outside."

"Do You Enjoy Good Health?"

"Of course. Did you ever know anyone who didn't enjoy good health?"

"Yes, the doctors."

The Treatment of Constitutional Syphilis by External Methods of Administration of Mercury.

Shaw-Mackenzie (Lancet, No. 3636, 1893) strongly commends the treatment of constitutional syphilis by means of calomel fumigation. Next to this in efficiency rank mercury inunctions. For this purpose the oleate of mercury should be employed, twenty per cent. strength. Fifteen grains are sufficient for the initial dose. It is cleanly, rapid in action, and one or two rubbings a week are sufficient to keep a patient gently under the action of the drug. In fumigating the patient is surrounded by a cloak, or, better still, sits in a box with only the head exposed to the air. A spirit-lamp (over which a china receptacle holding a little water and the calomel powder separately is arranged) is placed under the seat or between the patient's legs. The wick being lighted, the calomel is sublimed, and with aqueous vapor is deposited on the patient's skin, after which the patient goes to bed, still in his cloak, or remains for an hour surrounded by a blanket. It is usual to begin with a drachm and a half of purified calomel and go up to two drachms, or reduce to one drachm, as necessary. The patient is advised to remain in doors as much as possible, is seen once a week, and from a six weeks' to a three months' course is generally necessary, the gums being watched and the amount of calomel regulated by the effect produced. There should be no intermission of the daily or nightly bath, when the course has commenced, till all symptoms have subsided, when intermission may be gradually begun. It is important that the calomel should be thoroughly pure and the receptacle it sublimes from of china and not metal. With these precautions the fumes are not unpleasant; indeed, in many cases, it is desirable that they should, with limitation, be inhaled.

The advantages of the external or bath treatment are: (1) The satisfactory and safe way in which the effects of mercury may be induced and regulated; (2) the certainty of a successful result, with practical immunity from further and later serious manifestations; (3) no appreciable interference with general health or digestion (the most debilitated may take the baths, and the debility of tertiary disease or phthisis does not contraindicate them); the writer has seen albuminuria and glycosuria in syphilitic subjects entirely disappear, and has known a woman to bear a full-term

child who repeatedly aborted before her husband was put on a course of the baths ; (4) shortening of the term of treatment ; (5) the benefit of local fumigation to irritable sores and ulcers.—*Therapeutic Gazette*.

Treatment of Uterine Troubles.

More and more, as time passes and the smoke of discussion gives way to solid conviction, is the profession impressed with the thought that there are many of the diseases of women and girls, which, under no circumstances, require or should receive manipulative or mechanical treatment. Indeed, conscientious physicians, recognizing the neurotic factor, and granting to the uterus and its appendages the privilege of being locally disturbed by constitutional conditions, are ready to receive gratefully and enthusiastically such a remedy as Ponca Compound. It serves as a general stimulator of secretions, and as a thorough tonic. The endorsement of such men as Dr. A. M. Owen, of Evansville, Ind. ; Dr. Thos. Hunt Stucky, of Louisville ; Dr. Arch Dixon, President of the Kentucky State Medical Society ; Dr. Wm. F. Kier, of St. Louis, and hundreds of others scattered over the country, is convincing proof of the value of Ponca Compound.

A well-known clergyman made a visit to a well-known banker and asked to see him in a private room. "I have come to you," he said, "with a message from dear Jesus. I am in financial trouble, and I have been looking round for somebody to help me out. I went to dear Jesus and asked him to send some one who would help me. He named you." "Are you sure," said he, that he mentioned my name?" "Oh, I cannot be mistaken about it." "I recollect," said the banker, "that when the Lord sent Peter to Cornelius, He told Cornelius that Peter was coming. I think that if the Lord had sent you to me to get money, He would have intimated to me that He had done so. As He has not said anything to me on the matter, I must wait till I hear from Him."

Saturated Tinctures.

Daniel's Concentrated Tincture of Passiflora is becoming as popular as Norwood's Tincture Veratrum Viride. Both thoroughly reliable.

Our Vocation.

In an address delivered before the Medical Society of Southeast Missouri, the President, Wm. R. Goodykoontz, M. D., says : This vocation of ours is indeed a grand one. It is as broad as the world is wide—one that knows no night, no day, that recognizes neither calm nor storm ; one that presses as steadily on through the snows of Winter as the heat of Summer, making no note of the budding Spring with its coaxing showers, nor the varied hues of the falling leaves of Autumn, but going on, establishing itself in every country, every clime, claiming an inherent right to the palace of kings, and equally proud to exist in the cottage of the humblest peasant. A vocation honored by all people of every tongue, a calling unrestricted by civilization, it goes on, on ; enters the haunts of, is encouraged, even welcomed, by the savage tribes of the most distant lands. It knows no nationality ; recognizes no creed ; gives allegiance to no party. It claims alike as its subjects those of master minds and the model of clay bereft of reason. In war it knows no enemy. It enters the palace, as a prison ; and the prison, as a palace. It requires a compliance with, or an observance of, no law, sacred or profane. It is indeed a great calling—so great, so important that the flowers of Spring, in all their beauty and sweetness, vie with each other in contributing to its advancement. The fruits of Autumn withhold not their hand. So great, so important is it, that earth readily yields up her most precious minerals as a token of appreciation, while the clouds of heaven send forth the lightning to aid in its progress. It is unselfish, so unselfish that if prosecuted to a successful termination of the end desired would obliterate its own usefulness in that it would annihilate the germs of disease, and secure for the human family a condition of perfect health.—*Review.*

The Boston Medical Journal terms the new medical law of Pennsylvania "a bill to perpetuate medical sects." Hereafter all who enter upon the practice of medicine in that State must belong to one of the three sects, allopathic, eclectic, or homœopathic. In the community and by the courts every regular physician will be known by his sectarian name. The Journal is of the opinion that medical science should be free from restrictions, leaving the courts open for the punishment of those who commit malpractice or extort money under false pretenses.

Alkaloidal Medication

Therapeutics--Present and Prospective.

Extract from a Paper by DR. C. W. BEAUMONT, of Clarksville, Tenn.

"The crudeness of the materials from which we must derive our medical resources, and the wide variability in quantity noticeable in each particular drug, resulting from physical, clinical, and meteorologic causes, necessarily leads to inappropriate dosage, and hence to uncertain effect. Even those subject to careful assay, as for example, fluid and solid extracts, and obtained from the very best pharmacists, are not wholly exempt from such changes, and when administered produce capricious effects, or, on the other hand, prove to be utterly inert—in either case bringing disappointment and mortification to the prescriber, and, it may be, peril to the patient. Accordingly, in ordering a formula, to be in dram doses, we do not know whether a full or a minimum dose will be had, or, indeed, whether much or little or any medicine at all is received."

The trouble described above by Dr. Beaumont is entirely obviated by the use of the Dosimetric Granules, manufactured by the

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Dr. G. THIN (British Medical Journal. vol. ii, 1891, page 91) states that the consumption of water containing lime brings about the development of gouty conditions; no doubt it acts in the same way as the contamination of the water by lead.

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3. Because it comes from a region free from malarial germs.
4. Because all its mineral salts, and five of them in the exact form given in its analysis, are found in the human blood, of which they form a most essential part.

Analysis.—Each gallon contains :

Carbonate of Iron	1,100	grs.
Oxide of Iron	9,310	"
Chloride of Sodium	1,000	"
Sulphate of Soda and Potash	9,310	"
Carbonate of Soda and Potash	9,831	"
Carbonate of Magnesia	1,230	"

4,781 "

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The Cure for Wine, Woman, and Song.

Dr. Frank Kraft, of Cleveland, writes, in the Medical Advance, on wine, woman, and song, with special reference to their therapeutics. Dr. Kraft finds that excesses of wine, or rather alcohol, breeds three kinds of drunkards, each of which is best set up by certain remedies. These are his three pharmaco-clinical types: "Nux vom. for the beer drunkard, gelsemium for the champaign drunkard, and sulphuric acid for the 'rot-gut' whiskey drunkard." It appears from this that the hard drinker has only to make an intelligent diagnosis of himself and then fill his pockets with sulphuric acid, nux or sempervirens, as the case may be, in order to keep in good condition.

"Woman," Dr. Kraft thinks, "has caused man considerable trouble," and this cautious estimate of social history will not be generally disputed. We turn with some interest to find the drug which solaces man when he has had embittering experiences. Hyoscyamus, we find, is suited to relieve a disappointment in love so severe as to make the victim turbulent, talkative and irritable. Henbane quells the noisy lover. Belladonna helps the moody, sleepless and dangerous man. Let the ladies take notice, and reject their suitors with vials of the proper antidote. Nux vomica is for the passionate, sensual fellow who loves not well but for amorous ends, while staphisagria cures the man who is simply humiliated and mortified at his refusal. If disappointment in love makes a man swear, "give veratrum," says Kraft; "if it makes him lie give anacardium, and if it makes him a blackguard give chamomile. If he is intensely erratic, let him chew camphor."

"For the ills that come from song, Dr. Kraft does not say so much. He is vindictive toward tenors who sing too much and thinks they may be helped by stramonium. For the ill effects upon man of the song of others, his list is far too short, and includes only natrim mur, followed by sulphur and belladonna. The foregoing is contemporary medicine, though it sounds like a dream-book. As practitioners of medicine, we must look upon man and disease from every aspect, and Dr. Kraft furnishes us a very pleasing one."—*Medical Record*.

There are more than 105,000 practitioners of medicine in the United States in 1893, including all the pathists.

Trephining for Gunshot-Wound of the Brain.

Prof. von Bergmann recently reported the following cases before the Berlin Medical Society. The patient, a man, aged 28, had attempted suicide several years ago by shooting himself, with a revolver, in the left side of the forehead. Attempts to extract the bullet were unsuccessful. Half a year later a painful swelling appeared over the bone, which, after trephining and incision, proved to be a gumma and not an abscess, as had been suspected. The gummatous portion of the skull was removed, the defect becoming covered with cicatricial tissue. On March 11th of the present year, the patient again shot himself in the head. Three openings were found over the parietal bone, two being points of entrance and one being the point of exit of the bullets. Patient was admitted March 11th to Bergmann's clinic, and the day after became aphasic and somnolent. Three days after admission clonic spasms and paralysis of the right arm and hand developed. Trephining was performed and the bullet found beneath the point of entrance; the brain was lacerated at this place, but normal everywhere else. Numerous splinters of bone were removed and the bullet extracted. The wound was left opened and the lacerated area of brain covered with iodoform gauze. Clonic spasms developed the night and day after operation, but soon disappeared and the further course was favorable, the paralysis disappearing after three days. The tampon was changed several times. Later a plastic operation for covering the granulation tissue was performed.—*Deut. Mediz. Zeitung*, June 19, 1893.

Eczema is probably the most common skin disease that we are called upon to treat. A noted physician used to say: "There were but two great classes of skin disease—one being eczema and the other was not!" He knew this to be incorrect, but it was his object to impress upon the mind that Eczema, in some of its forms, was the skin disease that most commonly afflicted the human family. In the treatment of Eczema our sheet anchor has been Fowler's Solution, Donovan's Solution, &c. Well, it is an established fact that these remedies have virtues, but it needs no argument to convince the physician that the Elixir Six Iodides is a remedy much superior to the foregoing. The local treatment, however, must not be overlooked.

A Remarkable Case of Stab Wound of the Head.

By W. F. BROKAW, M. D., Cleveland, O.

In January, 1892, while attending a case of injury, my attention was called by a young man present to an old wound on his head about an inch above and two inches back of the left ear, which he said would not, for some reason, heal up.

Examination revealed a sinus suppurating slightly, and the presence of a firmly fixed metallic substance below the surface of the scalp, the scalp appearing considerably thickened and indurated around the point of injury.

Upon questioning the patient he said that in a quarrel, about six months before, he was stabbed in the head, and although the injury was very painful, and at times made him feel quite sick, yet he had not consulted a doctor in regard to it, and was not aware that there was anything in the wound. He was informed that probably a piece of the blade of the knife with which he had been stabbed was broken off in the wound.

The patient readily consented to an operation for its removal, and assisted by Dr. C. E. Cotton, he was anæsthetised and an incision made freely, exposing the broken end of the blade, which was found to be quite firmly lodged in the skull, considerable force being required to extract it. As anticipated, it proved to be a piece of the blade of a jack-knife over an inch in length, and fully half its length was buried in the skull.

There was no evidence that the skull had been entirely penetrated, however, as the bottom of the sinus was bony and no distinct symptoms of compression from fracture of the inner table or from hemorrhage could be obtained. The skull at this point being quite thick, it is probable that the brain was not reached.—*International Journal of Surgery.*

P. F. Peet, M. D., Professor of Genito-Urinary and Venereal Diseases in the Kansas City Homœopathic Medical College, Specialist, treats nothing but Genito-Urinary and Venereal Diseases: "I use the Elixir Six Bromides (W-G's) in my practice daily and find it to be most prompt and safe, fully meeting my most sanguine expectations. The Elixir Six Iodides (Walker-Green's) recommends itself to any physician who prescribes it."

Cod-Liver Glycerine in Faulty Digestion in Summer.

Almost invariably the diseases incident to summer are produced from faulty digestion, and as a result are followed by emaciation. The fault at first lays with the peptic glands of the stomach which become dormant, perhaps, from drinking large quantities of water between meals. A rare combination of digestive, alterative and reconstructive properties, which fully meet these indications, is found in Cod-Liver Glycerine; besides it can be given with other indicated remedies. The *modus operandi* of Cod-Liver Glycerine as a digestive is peculiar to itself, and possessed by no other remedy, viz: It extracts the natural peptones from the dormant peptic glands of the stomach, and compels each stomach to digest its own food in the natural manner. This extracting of the peptones (like milk from a cow's udder) stimulates renewed secretion, and in a short time the dormant peptic glands are active and healthy, and your patient is well. Whereas, if you use pepsine the dormant peptic glands remain dormant, and in time become atrophied and lost to the economy; besides, it is hard to believe that God in his wisdom ever intended that human food should be digested by hog-pepsine.—*Dr. J. E. Chambers, in Sanative Medicine.*

In the treatment of nervous diseases and general debility, McArthur's Syrup Hypophosphites demonstrates its restorative powers. Here it is not the stimulating action of the remedies usually classed as tonics that is needed. The organic powers of the system are already taxed to their utmost ability to carry on the physiological processes of life. The Hypophosphites of lime and soda gives the much needed effect in these conditions—not that of a stimulant by irritation, but that of a true nutriment to the starving tissues. Its tonic effects are permanent, as they are the effects of a richer blood supply, bringing healthy food and oxygen to the tissues. Thus the patient is gradually brought up to his normal condition.

For the cure of chancroids, Dr. Adinell Hewson, of Philadelphia, advises this treatment: The penis to be washed with hot water and the following lotion applied locally:

Calomel.....	2 drachms.
Liquor Calcis.....	3 ounces.
Listerine	1 ounce.

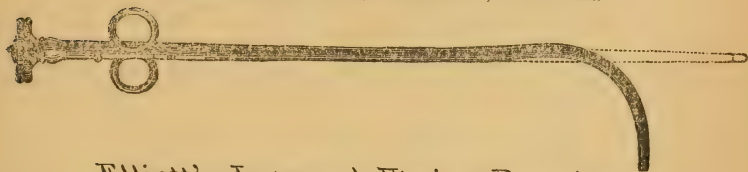
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Medulline is the sterilized extract of the spinal cord of the ox, and contains the substance required by this organ for its nutrition and normal action. It is possessed of great power, its effects being experienced in a few minutes, and continuing in a modified form for several days. It should not be used except under medical advice.

It has been found to be of great benefit in functional and organic affections of the spinal cord, rapidly effecting cures in the former, and even in the latter, where the morbid process has not advanced beyond the first stage, arresting their further progress and producing great amelioration in all the symptoms. Medulline has been for too short a time before the profession to warrant the assertion that it cures such diseases as locomotor ataxia and other scleroses of the cord, but the therapeutical promise is good enough to authorize the entertaining of a strong hope that this result will eventually be reached through its use.

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Medulline not being a substance foreign to the body, and acting as it does solely as a restorative, is not followed by reaction or subsequent formation of a habit.

Medulline is preferably administered hypodermically in doses of five minims, or a like amount may be dropped upon the tongue and allowed to be absorbed from the mucous membrane of the mouth. Its action is, however, in most cases, slower and not so decided, though sufficiently powerful in most instances.

The Medical Record remarks: "If physicians only knew how much more they could gain by being tolerant rather than critical, courteous and friendly rather than distrustful, they would make some mighty efforts towards becoming always and everywhere gentlemen."

Therapeutics in the Summer Disturbances of Children.

The careful, observing physician can but be possessed of the facts which have been established by the delvers in the laboratory regarding the various bacteria being a primary and an aggravating cause of many of the summer diarrhœas of children. Many times when the intestinal irritations are pronounced; when the evacuations give evidence of fermentation; when the frequent unsatisfactory passages, accompanied by marked tenesmus and straining effort on the part of the child, pointing strongly in the direction of dysentery; the administration of the one-hundredth to the fiftieth of a grain of corrosive sublimate to a teaspoonful of sweetened peppermint water, every two to four hours will be followed by almost magical results. Undoubtedly the remedy acts as a germicide, an antacid, as a stimulator of the biliary secretion and as such will serve as well. I have found in many conditions the following formula admirable :

Katharmon.....	One-half ounce.
Glycerine.....	One-half ounce.
Pepsine Cordial.....	Three ounces.

Dose—A teaspoonful every two to four hours.

If there be any pain present and it be desirable to prevent excessive peristaltis, a few drops of paregoric added to each teaspoonful will be well. The profession is no doubt familiar with the component parts of Katharmon, it containing acid salicylous from oil of wintergreen and boracic acid, but the most important of all, the dist. extract of witch hazel. In this latter remedy witch hazel we have a more valuable astringent and anti-hemorrhagic agent than we generally realize. It is most soothing to any irritated surface. It is one of the best local remedies to relieve the tendency to bleeding which we have and we can readily understand that for this reason if for no other, Katharmon would often be indicated in dysentery or the old-fashioned bloody flux.

Katharmon has certainly proven its value as an antiseptic and germicide of marked qualities. Its pleasant nature withal has made it a favorite with the profession as well as pleasant to patients.

Horsford's Acid Phosphate will keep the stomach and general system in good condition as a guard against disease. Sample, Rumford Chemical Co., Providence, R. I.

The Diagnosis of Love.

Dr. James Finlayson, in an historical review of Herophilus and Erasistratus (Glasgow Medical Journal, May, 1893,) quotes a story from Plutarch concerning the latter. Antiochus, son of the king Seleucus, fell in love with his step-mother, the young and beautiful Stratonice. His condition was extremely unhappy. He made the greatest efforts to conquer his passion, but they were of no avail. At last he resolved, in his despair, to rid himself of life, by neglecting all care of his person and abstaining from food; for this purpose he made sickness his pretense. Erasistratus easily discovered that his distemper was love; but it was difficult to conjecture who was the object. In order to find it out, he spent whole days in his chamber; and whenever any beautiful person of either sex entered it, he observed with great attention not only his looks, but every part and motion of the body which corresponds most with the passions of the soul. When others entered he was entirely unaffected, but when Stratonice came in, as she often did, either alone or with Seleucus, he showed all the symptoms described by Sappho; the faltering voice, the burning blush, the tremulous pulse, and at length, the passion overcoming his spirits, a *deliquium* and mortal paleness.

Erasistratus concluded from these tokens that the prince was in love with Stratonice, and perceived that he intended to carry the secret with him to the grave. He saw the difficulty of breaking the matter to Seleucus; yet, depending upon the affection which the king had for his son, he ventured one day to tell him "that the young man's disorder was love, but love for which there was no remedy." The king, quite astonished, said, "How! love for which there is no remedy!" "It is certainly so," answered Erasistratus, "for he is in love with my wife." "What, Erasistratus!" said the king, "would you, who are my friend, refuse to give up your wife to my son when you see us in danger of losing our only hope?" "Nay, would *you* do such a thing," answered the physician, "though you are his father, if he was in love with Stratonice?" "O, my friend," replied Seleucus, "how happy should I be if either God or man could remove his affections thither! I would give up my kingdom, so I could but keep Antiochus." He pronounced these words with so much emotion, and such a profusion of tears that Erasistratus took him by the hand and said: "Then there is no

need of Erasistratus. You, sir, who are a father, a husband, and a king, will be the best physician too for your family." Upon this Seleucus summoned the people to meet in full assembly, and told them it was his will and pleasure that Antiochus should intermarry with Stratonice, and that they should be declared King and Queen of the Upper Provinces.

For the cure of the young prince, Erasistratus is reported by Pliny to have received a fee of 100 talents, which is calculated as amounting to more than one hundred thousand dollars.

One peculiarity of the above case was that Sappho, a lady without professional claims, was the authority for the diagnosis, and Stratonice, a lady who had never expressed a desire to get a divorce, was prescribed without consultation to cure the case, while Erasistratus drew the fee.—*The Medical Age*.

Surgical Treatment of Gall-Stones.

Duncan (Edinburg Medical Journal, June, 1893), after detailing several cases coming under his observation, reaches the following conclusions:

1. That when the stones lie in the gall-bladder or lightly impacted in the cystic duct, chole-cystotomy is a safe and easy operation.
 2. That if the stone be impacted in the common duct, the gall-bladder is apt to be small, and such structures as the stomach and colon are prone to be adherent in awkward positions.
 3. That in such cases it is safe to incise the duct and drain from the wound.
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Notice the advertisement of Snellings & Burgess, of Manchester, Va. Their Compound Tincture of Four Chlorides is certainly a fine combination of medicines. A glance at the formula will commend the superiority of this preparation to every physician.

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Dr. B. M. Ricketts, of Cincinnati, after a thorough test of the various methods of treatment, strongly advocates the following procedure :

Inject a solution of cocaine in the field of incision cut down upon the veins apply two catgut ligatures half an inch distant, divide with a knife, and bring the stumps together with a single catgut suture. The parts are then returned and the external wound closed by continuous catgut or silk and dressed with boric acid. He does not now find it necessary to administer an anæsthetic of any kind to produce unconsciousness, having found that injections of cocaine will enable a painless operation to be done.—*N. Y. Med. Journal*, June 17, 1893.

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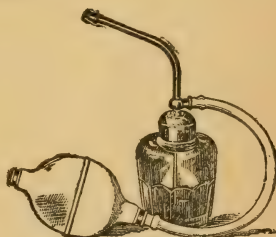
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Miscellaneous.

Preventive Treatment of Cerebral Hæmorrhage.

Dr. Joseph Collins discussed this interesting subject before the New York Post-Graduate Clinical Society, in January (reported in the Post-Graduate). He says attention has been directed more to the treatment than to the prevention of hæmorrhage.

The chief underlying cause of hæmorrhage is a condition known as arterio-renal disease, a disease first manifested in the blood, afterwards in the kidneys and heart and is, perhaps, dependent on a lesion of sympathetic ganglia. The premonitory symptoms of cerebral hæmorrhage are vertigo, a hard, firm, full and incompressible pulse, a persistent habit of waking at an early hour in the morning, being unable to sleep again, drowsiness during the day due to inelasticity of blood-vessels in the brain, headache, particularly toward evening, and a tendency to forget names. Such symptoms should be fortified by examination of the urine and use of sphygmograph, ophthalmoscope and stethoscope. The urine will be of low specific gravity and the quantity of urea diminished. It is important to collect the urine for twenty-four hours.

When the urea is found to be quantitatively or relatively diminished, it is indicative that the proto-plasmic changes in the blood are not sufficiently rapid to thoroughly complete oxidation or are not complete. Retention of these by products follows, and to these can be attributed many of the preceding symptoms of cerebral hæmorrhage. The ophthalmoscope will show retinal changes indicative of arterio-renal disease; the stethoscope will show the heart changes and the sphygmograph will show changes in pulse beat.

Preventive Treatment—Remove the cause, such as syphilis, gout, rheumatism, etc., and correct the by-products of nitrogenous metabolism. To this end give bichloride of mercury, first, to improve the nutrition of the blood and vessels; it stimulates blood-elaborating organs and, perhaps, blood producing organs. To relieve blood pressure without diminishing heart action, nitroglycerine is recommended, in doses of 1-200 grain. It restores the pulse rate and relieves the cerebral symptoms. Bromide of sodium is also efficacious under like circumstances. Viratrum

viride diminishes heart action, and is preferred to aconite when such treatment is indicated. The digestive tract must be cared for ; this is imperative. Care should be used in exercise, especially avoiding jumping out of bed and hurriedly relieving the bladder of the night's accumulated urine. When an attack occurs give nitro-glycerine in preference to ergot, which increases blood pressure, which is to be avoided if possible.

Against the Code.

A lady not feeling so well as she liked, went to consult a physician. "Well," said the doctor, after looking at her tongue, feeling her pulse, and asking her sundry questions, "I should like to advise you—ahem—to get married."

"Are you single, doctor?" inquired the fair patient with a significant, yet modest smile.

"I am, my dear lady, but it is not quite etiquette, you know, for physicians to take their own prescriptions."—*Exchange*.

"An author's style is a pretty good index of his character," says the editor of the Medical Review, "and usually, though not always, agrees with his manner of expressing himself in society discussions. A few men seem to have their ideas arranged in an orderly way, so that they can be presented in a few well chosen words. They follow the rule of saying what they have to say and then sitting down. The majority, however, have no clear notion of what they are driving at, and after floundering about for twenty minutes finally conclude, leaving the impression that they have simply been 'talking against time.' This pernicious habit is apparent in their writings—an attempt to spread a few facts over a large area." Strange as it may appear, the average physician, whose knowledge is supposed to be clear and definite, is not able to express himself tersely and accurately either in spoken or written language. This is a habit which could be easily remedied by requiring every advanced medical student and hospital interne to cultivate the system of recording the histories of cases and his own deductions from the data collected by him, and submitting his articles for literary criticism precisely in the same manner as college compositions. It is conceded that a physician should be a gentleman. Why not at the same time a master of English ?

Fees for Medical Service to Millionaires.

The two physicians who attended John W. Mackay, the California millionaire, in his recent illness, have sent in bills for \$5,000 and \$7,500 respectively. Mr. Mackay refuses to pay them, on the ground that the sums charged are exorbitant. We do not know the amount of service rendered, but if the rates exceeded the maximum fees, and if an extra sum was added, as is alleged, because Mr. Mackay is a multiple-millionaire, our sympathies are with him. A physician has no more right to treble his fees because a man is rich than has a tradesmen to treble the price for his wares. There are circumstances, however, when the service rendered is so directly saving of life and suffering, and where the attendance involves so much responsibility both for the life of the patient and the reputation of the surgeon, that it is difficult to say what should be the fee. Ordinary rules and rates do not apply here.—*Medical Record*, June 24, 1893.

An announcement is going the rounds of the press to the effect that "two million dollars were sent last year to foreign missions by the women of the United States." If the women of the United States had spent that two million dollars in the direction of educating and training and converting the heathen, who form a large part of the servant-girl class of the country, and let the outside barbarians alone, they would have done more to the glory of God and the salvation of their own homes—for none know better than doctors that the problems as to whether marriage is a failure or life is worth living, largely depend upon the solution of the servant-girl question. No one will deny the thought that the working woman of the world must be directed from factory, store, counting-room and profession into a labor closely related to the domain of the home—if not, we will soon drift into being a nation where the word home is unknown, and then may God have mercy on us.—*Medical Mirror*.

I have found Peacock's Bromides exceedingly efficacious in headache and cerebral congestion, more so by far than the ordinary bromides.

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Drs. J. STAHL, BERLIOZ and FRILLAT, found that Anthrax Bacilli were killed by a solution of 1:50,000, while Aaronson stated that solutions of 1:20,000 prevented the development of Typhus and Anthrax Bacilli, as well as that of Staphylococcus Pyogenes Aureus.

Dr. J. STAHL's observations showed that after one hour's exposure to a one per mille, or a quarter of an hour's exposure to a 1½ per mille solution of FORMALIN, the most resistant forms of micro-organisms were destroyed. FORMALIN, therefore, is equal at least in germicidal power to Corrosive Sublimate, and, under certain conditions, superior when Albuminoid Solutions are present.

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The Suppression of Information About Cholera in France.

Surgeon Fairfax Irwin, of the United States Marine Hospital Service, reported in the Abstract of Sanitary Reports for June 16, that the authorities of Marseilles had not only refused him the opportunity of inspecting the records, but suppressed everything relating to cholera, and that the newspapers were not permitted to publish the causes of deaths. The Medical Week for June 16, independently corroborates this report, stating that both the local and the central authorities seem once more to be endeavoring to conceal the truth, or at any rate to hide it under all sorts of designations. A rapidly fatal diarrhoeal disease has appeared in a number of the maritime departments of France, but not a single systematic bacteriological examination has been made. The course of concealment and perversion is in direct conflict with the agreement made at the recent sanitary conference at Dresden, and, though the agreement has not yet been ratified, it has been accepted by the various signatory powers, one of which was France. Perhaps if our health authorities declared France infected with cholera, the local authorities would realize their duty.

Fluid extracts should always be purchased in original, unbroken packages, put up by the manufacturer, and not filled out by the wholesale druggist from bulk stock. The manufacturers' label affords equal protection to buyer and seller, and places beyond controversy all questions as to the identity of the article or its quality. The Wm. S. Merrell Chemical Co. are so strenuous on this point that they discourage the purchase of their Green Drug Fluid Extracts from jobbers who write labels, and refuse to carry in stock fractional pounds put up by the manufacturer. Their position is the outgrowth of many years' experience, and physicians and druggists who favor their preparation will not accept fluid extracts in any other packages than those received intact as sent out from their laboratory.

A good product is always appreciated and its popularity with the profession is always a certain index of its value and worth. That (Coca Wine) of Messrs. Theo. Metcalf & Co., has had a phenomenal success and our readers should try it and be convinced of its superior merits.

The Conduct of a Medical Life.

Mitchell, in the University Medical Magazine, publishes two lectures in which he says among others: "Character is the true and sure object of a rational existence. Back of this character must be a creed. The practice of medicine is a profession, not merely a business. He who looks upon it commercially, and only thus, is apt to fail of even the mere financial form of success, because it is the peculiarity of our mode of earning a livelihood that it is not and cannot be regarded as a mere business. The more we study the lives of exceptionally successful physicians in all ages, the more clearly will we come to see that the brilliant triumphs have fallen most often to those who had the highest ideals as to what they were dutifully bound to give, rather than what they were in return to get. I am fond of saying that in our work we sell what neither we who sell nor those who buy can weigh or measure. We have no public to which we bend with abject submission, as does the lower newspaper man, most timid of the reptiles; no judge or jury listens to us; no press or public looks on to applaud or condemn. What we do neither patient or his friends can fully understand. One silent auditor makes up our moral accounts. That we live and are to live very largely a life of isolated self-judgment, that neither scale nor measure approves the amount and integrity of what we sell—this, I think, should make us doubly careful. I want you to go hence with unattainable ideas of what you mean to make your lives; the higher the better. At all events, have and hold distinct conceptions as to the qualities which make men great in the higher manhood of medicine, and acquire them now. The world may make strange havoc with your views when, as years go on, you are to be guided by them in the everyday work of life. But he is to be pitied who, when young, having no ideals of duty, waits for opportunities to generate a code of conduct."

The medical students of Paris recently inaugurated a series of riots in that city, because the manager of one of their dances was fined for allowing women to appear before them in startling nudity.

Dr. Hare says that since acetanilid and the other coal-tar derivatives lessen the heat-production of the body, they should not be given to persons who are liable to be subject to cold.

The New York City Health Department and the Diagnosis of Diphtheria.

The department has recently issued the following circular of information concerning the use of bacterial cultures by the health department for the diagnosis of diphtheria :

Recent investigations have shown that a considerable proportion of pseudo membranous and exudative inflammations of the throat and upper air passages, commonly considered as diphtheria and having the anatomical appearances found in diphtheria, are not true diphtheria. These cases may be called false diphtheria.

It has also been shown that a considerable number of cases considered to be false diphtheria are really true diphtheria. While in true diphtheria the mortality is very high and the danger of transmission to others is great, in false diphtheria the mortality is low and the danger of infection slight. The diagnosis between true and false diphtheria can be made by bacteriological examinations within twelve hours, while without their assistance it is difficult or impossible.

The health department is now prepared to make use of bacterial cultures for diagnosis in all cases of suspected diphtheria occurring in the city, and desires that in every case either the physicians should themselves make the inoculations or should authorize an inspector to make them. They should be made in every suspicious case at the earliest possible moment. It is only in this way that the full benefit of a positive diagnosis is obtained, for during convalescence the specific organisms often disappear from the throat. The inoculations are made by gently rubbing a cotton swab against the throat, and then drawing it over the surface of the culture medium. When the physician desires to make the culture himself (and this is usually the better plan, for it can be done earlier and is more agreeable to the family), he can obtain, free of cost, a culture tube and swab and the simple directions necessary for their use at any of the apothecaries whose addresses are given below. After the inoculation the tubes are to be returned at once from whom they were obtained. The tubes will be collected by the department every evening. If, on the other hand, the physician desires an inspector to make the inoculation, he is requested to state this when the notification of the case is sent to the depart-

ment. The diagnosis will be ready in every case by noon of the following day. The attending physician can obtain this immediately by telephoning to the laboratory (telephone number, 1191 Spring), or, when this is not done, he will be notified by mail.

Cases which prove to be false diphtheria will not be visited by the department. Cases, on the other hand, which prove to be true diphtheria will be subjected to the usual rules and regulations covering contagious diseases.

The culture tubes and swabs can be obtained of the following apothecaries: Fraser, 138th street and Third avenue; Spear, 125th street and Eighth avenue; Dorn, 93d street and Ninth avenue; Rupp, 36th street and Ninth avenue; Proben, 12th street and Second avenue; Ottiwell, Ludlow and Broome streets; Marsh, 125th street and Madison avenue; Barnes, 110th street and Madison avenue; Hoypendorf, 67th street and Third avenue; Shoemaker, 42d street and Park avenue; Fraser & Co., 29th street and Fifth avenue; Bigelow, 8th street and Sixth avenue; Laboratory, 42 Bleeker street.—*N. Y. Med. Jour.*

L. B. Grandy, M. D., Demonstrator of Anatomy and Microscopy, Southern Medical College, says: "Antikamnia has given me the most happy results in the headaches and other disagreeable head symptoms that have accompanied the late catarrhal troubles prevailing in this section. In my practice it is now the remedy for Headache and Neuralgia, some cases yielding to it which had heretofore resisted everything else except morphine. I usually begin with ten-grain dose, and then give five grains every fifteen minutes until relief is obtained. A refreshing sleep is often produced. There seems to be no disagreeable after-effects."

Fellow's Hypophosphites is one of the standard remedies which have been before the medical profession for a generation. Its efficacy has never suffered any impairment and it is as popular to-day as ever, its use being more widespread than ever.

Coca is so well known and its properties are so universally recognized that it is unnecessary to dwell upon these subjects. What is not so well known, perhaps, is that Mariana & Company make a wine which is not only pleasant to take, but includes as well, all the good properties of the plant in a palatable and efficient form.

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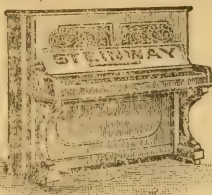
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Fig. 1.

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DIRECTIONS FOR MEASUREMENT.

Give exact circumference of body at K, L, M.

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Fig. 4.

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CHARLOTTE, N. C.

Please Mention Charlotte Medical Journal.

The American Girl as She Sometimes Is.

This young compatriot of ours no longer laces herself to breathlessness and a red nose and a pimpled forehead, pushing what flesh there is into regions where it makes deformity; she wears corsets, but only to outline and partially support, never to press or pinch, and thus her digestive organs are kept free to do their work and assist in preparing the rounded and velvety surface, the glow in the eye, the blush upon the cheek, the dye of the soft lips; for, unpoetical as it appears, the laboratory of beauty is in the stomach. In addition to all this, the American girl is no longer ashamed of her foot. She used to think it a disgrace if she wore a larger shoe or boot than a number $2\frac{1}{2}$; if she wore fours she managed them; if she wore fives, she hid her foot. Now she understands that it is a law of statuesque beauty that a body should have an extremity apparently equal to its support—a woman a foot big enough to stand on, and *bien chaussee*, *bien gantee*, she never dreams of lengthening her skirt because her shoe is a six or seven, or of keeping her hands out of sight because they did not stop growing when she was ten years old. Owing to this last act of wisdom she can walk with freedom where she will, without pinched feet or any of the discomforts that urge her to sit still; and thus she takes with delight the exercise which does so much for her, which fills her lungs with fresh air and oxygenates her blood, and gives it all its life and sparkle wherever its effects are visible. After all, it is common-sense, the appreciation that nature says how much to eat and what to wear, that has reformed an ailing and early withered woman into a beauty of the old Greek type.—*Harper's Bazar*.

Lister says that the surgeon's enemies are almost always sporeless bacilli, and though some of these show great resistance to the action of antiseptics, such as the staphylococcus pyogenes aureus, the common cause of suppuration, it has nevertheless been shown that carbolic acid destroys these organisms more rapidly than corrosive sublimate.—*Cincinnati Lancet-Clinic*.

Antapana is one of those products which has the property of relieving pain and of acting as an antipyretic as well. The Western Chemical Company has exerted itself to produce something of real usefulness and it has admirably succeeded.

Summer Diarrhœa of Children.

There can be no question that the summer diarrhœas of children are produced by acute indigestion, whether this be due to the deterioration of infant food, or to the direct influence upon the system of excessive heat. Amongst the many prophylactic aids to digestion, which are at the same time aseptic and anti-fermentative, pepsine combined with lactic acid ranks as the most desirable combination. Thus the following prescription, which embodies the principle suggested, will be found valuable :

R. Maltopepsine (Tilden's)..... 1 dr.

Divide into 12 powders. One powder after each nursing, bottle or meal.

Where diarrhœa already exists, the following will be found very serviceable :

R. Maltopepsine (Tilden's)..... gr. 75.

Calomel..... gr. 1.

Divide into 15 powders. One every hour until diarrhœa ceases.

"Cirrhosis of the Liver," a disease of very common occurrence, is usually the result of some irritant poison circulating in the Portal or Hepatic Blood, caused by Alcohol, Scarlatina, Malaria, Tuberculosis, Rickets, Ptomaines, Syphilis, &c. Our clinical experience has taught us that whatever improves the general health should naturally be given, and we know of no medicinal preparation that we have more confidence in than the Elixir Six Iodides (W-G's), for it certainly is an excellent alterative and general tonic, besides it is a pharmaceutical preparation that is most acceptable to the palate.

A young miss of eight summers was asked about her brother, who was ill with the fever. The doctor had taken his temperature just before she left home, and found that his fever was not nearly so high. "Oh, brother Frank's better," she answered the questioner. "The doctor took his *diameter* this morning, an' it's much smaller."

Tritica has been recently recommended by those in high authority and the Searle & Hereth Company are prepared to exhibit some of the most valuable testimonials certifying to the efficacy of their product in cystitis, urethritis, pyelitis, and allied conditions.

Earache.

Steaming the ear will often give relief. Place the larger end or base of a cone of paper over the spout of the teakettle having the boiling water, and the apex of the cone as near the ear as possible, not to burn the patient, the patient lying with the affected ear downward with it sufficiently free to allow the steam to enter the canal. To be used from three to five minutes at a sitting, and as frequent as necessary.

The Cut Direct.

"For years he was well known to me,"
So the physician sadly said,
"But now, called to his autopsy,
I am obliged to cut him dead."—*Brooklyn Life*.

The second edition of Dr. Adolf Alt's Text-Book on Ophthalmology is very near completed, and the very flattering notices already received, assures the publishers, J. F. Chambers & Co., St. Louis, Mo., that this edition will meet with more success than the first. The work will make a volume of 350 pages fully illustrated.

Leucorrhœa is certainly a most annoying as well as distressing complaint. The North Chemical Company has given the physician a simple cure for this condition in the Helonia Tablets which are not only efficient but of easy application.

Dr. Wm. Goodell says: "Personally I cannot recall a single case in which a woman has borne a child after having suffered with gonorrhœa. Strumpets rarely become pregnant, for most of them have had this disease."

In the constipation of infants, often the only treatment indicated is massage of the abdomen over the descending colon, once or twice each day, practiced from five to ten minutes each time.

Dr. Carlos Montezuma, a full-blooded Indian, has been appointed Government Surgeon at Nisgralein, on the Colvide Reservation, Washington.

Leucorrhea is often due solely to constipation.

The Reading Doctor.

The best informed and most successful physicians are those who read the greatest number of medical journals for, in this way, a comparatively small amount of reading suffices to keep them conversant with current medical news and at a trifling cost.

The Anderson Vaginal Capsules are designed for the introduction of medicated tampons into the vagina, and are convenient, simple and cleanly; they prevent the medicament from being pressed out from the absorbent cotton during introduction; thus gaining the advantage of retaining the full strength of the ingredient used and avoiding the annoyance to the patient of exposure or soiling the underlinen. They can be used in all cases of diseases of the vagina and cervix uteri for exhibiting local remedies, and also act as a capital support to the uterus in prolapsus, malposition and relaxation of uterine ligaments and antonicity of the vaginal wall. Unlike mechanical pessaries, they do not cause irritation, congestion, chronic inflammation, or uncomfortable feelings; but they have both curative and healing properties, with facility of application. I have used them for some time now, and find them superior to any other means I have yet tried for local medication, and as a support to the uterus; for any known remedy can be employed, whether astringent, sedative, antiseptic or alterative. I have used them with success in leucorrhœa, vaginitis, ulceration of cervix uteri, etc., and have found them eminently serviceable. I beg to call the attention of gynecologists and general practitioners to the great advantages of these capsules over all other forms of local medication.—*M. K. Hargreaves, M. D., in London Lancet.*

Good Definition for the Code.

CODE—a body of laws made for the purpose of punishing petty offenders, protecting big scoundrels, giving employment to lawyer, and to be obeyed by the good.

Dr. Thos. H. Mauley, A. M., M. D., Visiting Surgeon to Harlem Hospital, N. Y., believes Verrhus Clemiana to be one of the finest preparations in the treatment of those conditions resulting from specific and scrofulous diseases.

Summer Diseases.

The H. K. Mulford Company, Philadelphia, has issued a very practical little brochure entitled Therapeutic Notes on Summer Diseases ; it will be sent gratis to any physician applying.

I have used Cactina Pillets and find them very valuable in common heart troubles when weakness and irregular action is manifested. I shall use them in the future.

ALFRED DAY, M. D.,

Boston, Mass.

Supt. and Physician Washingtonian Home.

ROBINSON'S LIME JUICE AND PEPSIN.

EXCEEDINGLY VALUABLE IN CASES OF

Dyspepsia, Indigestion, Heartburn, Mal-Assimilation, Aperient and Cholagogue.

Highly recommended in all cases of disordered Digestion. Chemistry and Physiology prove that the digestive properties of Pepsin are developed only in an Acid medium. A solution of the same in Lime Juice (sweetened and flavored) therefore furnishes a very active and palatable preparation.

DOSE—The adult dose is from a dessertspoonful to a tablespoonful, to be taken immediately after eating. To CHILDREN, one-half to a teaspoonful may be given, according to age.

Price, 6-oz. Bottles, 50c; Pints, \$1.00

Samples sent gratis, if parties ordering them will pay express charges.

Manufacture also **ROBINSON'S**

HYPHOSPHITES, Nutritive, Tonic, Alterative.

HYPHOSPHITES WITH WILD CHERRY BARK, A very Valuable Combination.

AROMATIC FLUID PEPSIN, Dyspepsia, Indigestion or any Digestive Disorders.

PHOSPHORIC ELIXIR, Modified Form Chemical Food.

WINE COCA, Nerve Stimulent.

ELIXIR PARALDEHYD, Hypnotic, Sedative, Anodyne.

COLORLESS HYDRASTIS.

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The most potent and reliable ALTERATIVE TONIC yet presented to the Medical Profession, especially useful in the following and their allied diseases:

Strumous Conditions, Tuberculosis, Secondary and Tertiary Syphilis, Chlorosis, Chorea, Chronic Malaria, Nervous Diseases—especially when associated with weakness, such as Melancholia;
Chronic Gastric Disorders, Neuralgia, Rheumatism, Uterine and Pelvic Troubles,
Anæmia from any cause, Skin Diseases—particularly Psoriasis and Eczema;
Loss of Appetite, General Debility, and in fact, it can be used wherever a true ALTERATIVE AND TONIC is needed.

A glance at the formula will at once suggest its therapeutic applications, and recommend the superiority of this elegant preparation to every physician.

FORMULA.

Each fluid drachm or	{ Chloride Arsenic.....	gr. 1-50
teaspoonful contains	{ Bichloride Mercury.....	gr. 1-50
	{ Proto. Chloride Iron.....	gr. 1-2
	{ Chloride Quinine.....	gr. 1-8
	Tincture Cinchona, U. S. P., and Aromatics, q. s.	

DOSE—One to two teaspoonfuls three times a day, as indicated to and directed by the Physician.

For Sale in 12-oz. Bottles.

Price, \$1.00.

TESTIMONIALS.

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Gentlemen—In reply to your inquiry as to the results of Tincture Four Chlorides Compound, I will state that after careful and close observation, it has proven to be one of the finest tonics I have ever used in Anæmia, Tuberculosis and Scrofulosis, Chronic Malarial Poisoning, Secondary and Tertiary Syphilis, Debilitated Nervous subjects, Chronic Skin Lesions, and in convalescents from all wasting diseases.

Very truly yours,

WM. P. MATHEWS, M. D.

WEST POINT, September 29th, 1892.

Messrs. SNELLINGS & BURGESS:

Gentlemen—I used the bottle of the Four Chlorides you sent me and was so much pleased with it that I made my druggist order two dozen, which I have used and ordered more. It is a beautiful preparation and the combination is excellent. After cases of Malarial Fever, when we need a good Tonic and Alterative, it is the very thing. It is pleasant to take. The Bichloride stimulates the action of the liver and regulates the bowels just right. Yours very truly,

W. L. GATEWOOD, M. D.

SAMPLE SENT UPON APPLICATION TO

SNELLINGS & BURGESS, MANUFACTURING PHARMACISTS,
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TRADE SUPPLIED BY ALL JOBBERS.



Glycerole Morrhue.

For Pulmonary and Wasting Diseases, and acute intestinal disorders. Highly recommended by Professors French, Briggs, Love, Carpenter, Bernays, and many others. Exclusively used in many Hospitals.

Literature and Physicians' Aluminum Pocket Piece sent, if you mention CHARLOTTE MEDICAL JOURNAL; or, your name and address engraved on Pocket Piece for 25c. Mail sample sent for 15c. postage.

Kept by all leading Drug Jobbers. Have your Druggist order it. Price \$1.00; \$8.00 per Dozen.

COD LIVER GLYCERINE COMPANY,

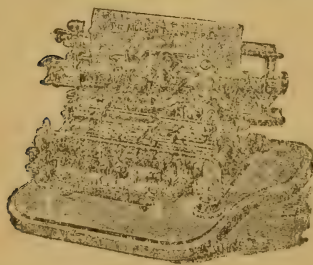
Manufacturers Medical Oil Glycerines,

ST. LOUIS, MO., U. S. A.

A Summer Remedy.

A Concentrated Glycerine of the Active Properties of Cod Liver Oil. A Scientific Product; Not an Emulsion, nor Mixture. Mixes with Water, or Any Prescription. Pleasant as Glycerine.

Reconstructive. — Digestive.



The Munson Type Writer

is simple, durable, light, speedy, combining in a wonderful degree the strong points of the best makes.

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Unlike most Disinfectants, such as the Coal Tar products, Carbolic Acid Phenyl, Creosot Naphthalin, etc., etc., "SANITAS" does not rob the air of its vital oxygen (so essential to animal life), nor hide the foul smells of decomposition by an overpowering odor of its own, but it actually generates oxygen in its most active form and destroys all offensive matter and disease germs, and is free from the dangers attending the use of the poisonous metallic salts employed as disinfectants.

A Disinfectant to be fit for Universal Use, should be:

An effective Germicide, but not poisonous if by chance taken internally.

Prompt and energetic in its action, but not offensive in smell.

A powerful air purifier, but not a consumer of oxygen.

An efficient deodorizer, but not corrosive.

"SANITAS" is the only preparation known to Science which possesses all these necessary qualifications. "SANITAS" is prepared from the essential oils of the Pine and Eucalyptus. For composition and method of manufacture, see our Pamphlet. "SANITAS" is put up in the form of

FLUIDS, OILS, POWDERS, AND SOAPS.

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VIN IODOTANÉ NOURRY

IODINE and TANNIN in WINE

A Substitute for Cod Liver Oil

Iodinated Wine (Nourry) is a preparation in which Iodine is really combined with Tannin. Its richness in Iodine, its pleasant flavor, its stability, and (on account of the action of the Tannin) its being so perfectly well supported by the most delicate stomachs and so easy of assimilation render it the most effective and agreeable form in which Iodine can be administered. The Iodinated Wine (Nourry) would therefore suggest itself for

Use whenever Iodine is indicated

It has been found superior to Cod Liver Oil, especially in children's maladies. It is recommended in phthisis, la grippe, anaemia, rheumatism, bronchitis, asthma, emphysema and chronic catarrh by such eminent French physicians as Drs. Dujardin-Beaumetz, Féréol, Huchard, de Saint-Germain, Simon, Sevestre, Gibert, Moizard and Abadie.

To avoid substitution *Nourry* physicians should write
"Vin (Iodotané) Nourry" and should exact the manufacturer's signature.

Send for pamphlet to

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Mention this Journal

In Amenorrhœa of anæmic or chlorotic patients, one capsule 2 or 3 times a day, given a week preceding menstruation, rarely fails to induce a normal flow.

APIOLINE

(CHAPOTEAUT.)

The true active principle of Parsley, differing from the so-called Apiol.

Dispensed in spherical capsules of 20 centigrammes.

Original bottles contain 24 capsules.

In Dysmenorrhœa, (congestive and spasmodic) amenable to internal remedies, the suppressed, irregular or painful menstruation is promptly relieved.



IN CYSTITIS and the Acute or Chronic stages of CONORRHOEA, it is impossible to get as good results with ordinary sandal-wood oil, copaiba, cubebs, or other balsamies, as with the **OLEUM SANTAL: (MIDY)** distilled by Midy's process from freshly-cut Mysore Sandal Wood and dispensed only in small spherical capsules containing 5 minims each. DOSE:—One capsule 6 to 12 times a day at regular intervals.

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"That Excellent Antiseptic."—*Medical Chronicle*, Baltimore.

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"In which the well-known soothing and healing properties of Pine-tar are skilfully combined with Vegetable Oils and Glycerine."—*Medical Times*, New York.

"Is exceedingly smooth and agreeable to the skin, and a valuable remedy in skin diseases."—Prof. D. G. BRINTON, M. D., *Med. and Surg. Rep.*, Phila.

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The real and only pure antipyretic and anodyne that has all good effect and no bad.

Administered in Influenza, La Grippe, Colds, Croup, Neuralgia, Rheumatism, Headache, Fevers and like complaints it has no equal. Correspondence with Physicians solicited. Powders, in one ounce bottles, for sale by Wholesale Druggists at 65c an ounce, but should you fail to get it from your Druggist order direct from the

WESTERN CHEMICAL COMPANY, Clarksburg, Mo.

New Combination AND ADDITIONAL SIZES TABLETS

ANTI-KAMNIA TABLETS

ONE . . . TWO . . . THREE . . . FIVE . .
AND TEN . . GRAINS . . EACH.

COMBINATION TABLETS = ANTI-KAMNIA AND QUININE.

CONTAINING 2½ GR. EACH ANTI-KAMNIA AND SULPH. QUININE.

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SAMPLES FREE.

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a pleasant and effective liquid laxative has long existed—a laxative that would be entirely safe for physicians to prescribe for patients of all ages—even the very young, the very old, the pregnant woman, and the invalid—such a laxative as the physician could sanction for family use because its constituents were known to the profession and the remedy itself had been proven to be prompt and reliable in its action, as well as pleasant to administer and never followed by the slightest debilitation. After a careful study of the means to be employed to produce such

A Perfect Laxative

the California Fig Syrup Company manufactured, from the juice of True Alexandria Senna and an excellent combination of car-

minative aromatics with pure white sugar, the laxative which is now so well and favorably known under the trade name of "Syrup of Figs." With the exceptional facilities, resulting from long experience and entire devotion to the one purpose of making our product unequalled, this demand for the perfect laxative

is met by Our Method

of extracting the laxative properties of Senna without retaining the griping principle found in all other preparations or combinations of this drug. This method is known only to us, and all efforts to produce cheap imitations or substitutes may result in injury to a physician's reputation, and will give dissatisfaction to the patient; hence, we trust that when physicians recommend or prescribe "Syrup of Figs" (Syr. Fici Cal.) they will not permit any substitution. The name "Syrup of Figs" was given to this laxative, not because in the process

of Manufacturing

a few figs are used, but to distinguish it from all other laxatives, and the United States Courts have decided that we have the exclusive right to apply this name to a laxative medicine. The dose of

"SYRUP OF FIGS"

as a laxative is one or two teaspoonfuls given preferably before breakfast or at bed time. From one-half to one tablespoonful acts as a purgative, and may be repeated in six hours if necessary.

"Syrup of Figs" is never sold in bulk. It is put up in two sizes to retail at fifty cents and \$1.00 per bottle, and the name "Syrup of Figs" as well as the name of the California Fig Syrup Company is printed on the wrappers and labels of every bottle.

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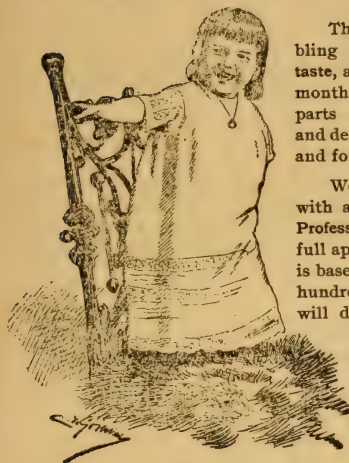
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CARNRICK'S LACTO-PREPARATA and SOLUBLE FOOD.



The former is an all-milk Food, closely resembling human milk in character, composition and taste, and designed for infants from birth to seven months of age, and the latter is composed of equal parts of Lacto-Preparata and Dextrinated Wheat, and designed for the remainder of the nursing period and for Invalids.

We make the statement at the head of this page with a knowledge of the general opinion of the Profession in reference to artificial feeding, and a full appreciation of what our statement implies. It is based on personal observation and actual test in hundreds of cases, and we hope that no Physician will doubt this statement without verifying it by making a trial of our Infant Foods as now put up in hermetically sealed cans.

Samples will be furnished gratuitous if you desire to make a comparative test.

*KUMYSGEN



Or Kumyss in powder form for making Liquid Kumyss in less than one minute, by simply dissolving the powder in water.

More nutritious and more palatable than any Liquid Kumyss.

There is no Food that equals it in all forms of Indigestion, Pulmonary Affections, Fevers, Vomiting in Pregnancy, Cancer of the Stomach and all conditions of the digestive organs where no food or even water can be retained. In Phthisis, witill increase weight and strength far more rapidly than

Cod Liver Oil.

KUMYSGEN is incomparable as a Food where easy digestion, high nutrition and palatability are desired.

A pound bottle of **KUMYSGEN** will be sent any Physician prepaid on receipt of fifty cents, which is about one-third its retail price. **KUMYSGEN** is now put up only in bottles holding 20 ounces and 5 pounds.

KUMYSGEN is much less expensive than ordinary Liquid Kumyss to prescribe and its keeping qualities are perfect, while the latter spoils in a very short time.

***KUMYSGEN**, when first prepared, was not relished by some patients, but, as improved, commencing with batch 200, it will please the most delicate palate

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Phytoline

A POWERFUL ANTI-FAT.

Phytoline is now recognized by the Medical Profession as being the only remedy in the Treatment of Obesity that will absorb the fatty tissue in a great degree without any evil after-effects whatsoever.

A REMEDY
PREPARED FROM THE
ACTIVE PRINCIPLE OF
THE BERRIES OF THE
PHYTOLACCA
DECANDRA.

A VALUABLE PRESCRIPTION FOR OBESITY AND FATTY
DEGENERATION
OF THE HEART.

Rx Phytoline (Walker's)
Sig.— Take ten drops in
water before and after the three
daily meals, as directed
Dr

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BAKER'S EMULSION is prepared from

the finest Cod Liver Oil in the world, and can be prescribed with assurance of the most satisfactory results.

Palatable. Bottles contain full 16 ounces.

Of Druggists.



Established 1830.

Made in Winter in the Lofoten District of Norway and Imported in Sealed Cans. Always fresh and sweet.

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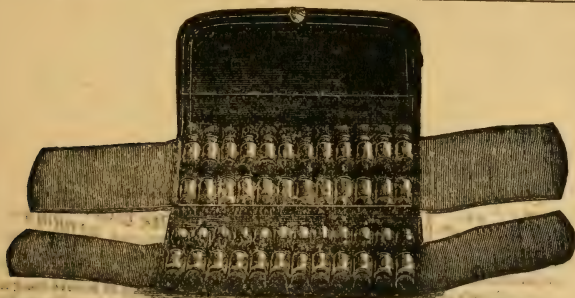
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Solution Ferrous Malate.

Ferrous Malate, Gentian and Cinchona.

Solution Salicylate of Iron.

Barlett's Pile Suppositories.



All vials in this case are fitted with screw-caps.

The
INTERESTING
Offer

of a handsome double morocco pocket medicine case— $7\frac{1}{2} \times 3\frac{1}{4} \times \frac{1}{2}$ inches—containing 24 vials filled with a complete assortment of our popular Tablets and triturates, at the special price of \$3.00, has been

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Acetanilid Comp. (Migraine).
Anti-Constipation (Mulford Co.)
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Ammonii Chloridum Comp.
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Diarrhoea.
Ergotine (Bonjean's), 1 grain.
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Hydrarg. Chlor. Mite et Ipecac et Sodii-Bicarb, No. 1.
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Pulv. Ipecac et Opil (U.S.P.) representing $2\frac{1}{2}$ grains
Tinct. Aconiti, 1 minim.
Tonsillitis (Mulford Co.)
Corros. Sublim, 1 grain (colored blue, antiseptic).
Quinine Sulphat, 1 grain.
Hydrarg. Chlor. Mite, 1-10 grain.
Kermes Mineral Comp, (Dr. E. Wilson).

These cases are a permanent advertisement for us, as they are constantly being refilled with our standard preparations, which physicians use because they are so reliable, valuable, convenient and elegant—all compressed. We continue this attractive \$3.00 offer for a limited period. Send check, money-order or postal note. We deliver it free of postage.

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2132 Market Street,
PHILADELPHIA.

Nervous Exhaustion.

HORSFORD'S ACID PHOSPHATE.

Recommended as a restorative in all cases where the nervous system has been reduced below the normal standard, by overwork, as found in brain-workers, professional men, teachers, students, etc., in debility from seminal losses, dyspepsia of nervous origin, insomnia where the nervous system suffers.

It is readily assimilated and promotes digestion.

Dr. Edwin F. Vose, Portland, Me., says: "I have prescribed it for many of the various forms of nervous debility, and it has never failed to do good."

Send for descriptive circular. Physicians who wish to test it will be furnished, upon application, with a sample, by mail, or a full size bottle without expense, except express charges.

Prepared under the direction of Prof. E. N. HORSFORD, by the

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Ponca Compound

Uterine Alterative

Metritis
Endo-Metritis
Subinvolution
Menorrhagia
Leucorrhoea
Metrorrhagia
Ovarian Neuralgia
Dysmenorrhoea
Painful Pregnancy
After Pains

FORMULA

EXT PONCA 3 GR.
EXT MITCHELLA REPENS 1 GR.
EXT CAULOPHYLLIN 1/4 GR.
HELONIN 1/8 GR.
VIBURNIN 1/8 GR.

PONCA COMPOUND
UTERINE ALTERATIVE

DOSE

ONE TABLET
AFTER EACH MEAL &
BEFORE RETIRING

Exercises a specific alterative action on the uterine tissues, a general tonic influence on the Pelvic Organs; has a tendency to absorb plastic deposits, to regulate the vascular supply, to relieve congestion, to tone up the nerve forces, to encourage peristalsis of the bowels, and to remove spasmodic conditions.

FOR LITERATURE & SAMPLES

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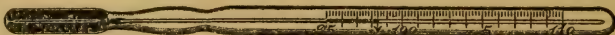
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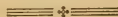
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from almost any cause.

SKIN DISEASES,
both scaly and papular.

PRIMARY.

**SECONDARY,
and TERTIARY
SYPHILIS.**

**Chronic UTERINE
And PELVIC
DISEASES.**

**ENLARGEMENT
OF THE LIVER,
SPLEEN AND
KIDNEYS.**

**OBSTRUCTIONS
to the
GLANDULAR
SYSTEM.**

FORMULA.

Each fluid drachm contains:

Arsenici Iodidum 1-125 grain, Ferri Iodidum 1-12 grain, Hydrargyri Iodidum 1-125 grain, Manganesi Iodidum 1-10 grain, Potassii Iodidum one grain, Sodii Iodidum one grain, with Aromatics.

MEDICAL PROPERTIES.

The greatest value of this combination is, that it often relieves those obscure and chronic obstructions to gland action, whether of the great glands as the kidney, liver, pancreas, or of the lymphatic system, which may exert so great an influence for evil on the economy. It seems to continuously increase its gain of confidence of the Medical Profession, as its use is indicated in a wide range of diseases, particularly so in pernicious anemia, many forms of skin disease, both scaly and papular; has remarkable curative effects in specific diseases and other manifestations of systemic infection; in females suffering from chronic uterine and pelvic diseases, and in all kindred complaints, where an alterative and tonic is indicated.

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Teaspoonful, three times daily, shortly after-meals, and never on an empty stomach. The dose may be increased to a tablespoonful, if the Physician so directs.

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Ozena and Catarrh,**

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**NECROSIS, CARIES
AND**

in all Cases where a
**Tonic or Alterative
is indicated.**

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Medical Properties. This preparation is entitled to rank as one of the most valuable therapeutical agents in quieting non-inflammatory excitement of the Reflex Centers of the Cord, of the Peripheral Afferent Nerves, of the GENITAL FUNCTION, and of the CEREBRUM. It is particularly valuable in EPILEPSY, nearly always effecting a permanent cure where the disease is idiopathic, and the patient follows up the treatment closely. In many forms of Puerperal, Infantile and Hysterical Convulsions, the most happy results follow its use. The ELIXIR SIX BROMIDES cannot be overrated in relieving Nervous Headache, Sleeplessness, Neurasthenia, and General Nervous Irritation, and the various Functional Disorders. As a direct means of diminishing the frequency of Seminal Emissions it is of great service. We claim that the ELIXIR SIX BROMIDES is much LESS DEPRESSANT to the CIRCULATION than if a lesser number of the Bromides were administered, also the Iron it contains gives it the great advantage of not being followed—even if its use is LONG CONTINUED—by the SEVERE ANÆMIA that so often follows the use of the Bromides given alone.

DOSE FOR AN ADULT. One to two teaspoonful three or four times a day mixed with a tablespoonful of sweetened water, until improvement justifies a diminution of the frequency, or until some physiological effect of the ELIXIR makes it necessary to diminish the dose and to lengthen the time between the doses.

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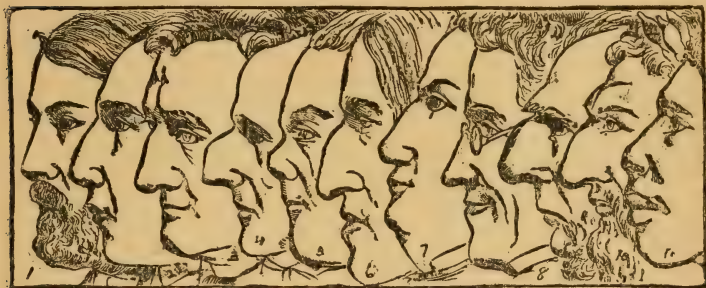
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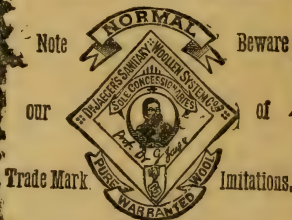
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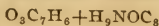
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A Refreshing Tonic and Reconstructive.

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Many persons have fair health during the cooler months of the year, yet suffer greatly from debility during the long, hot summer. The relaxing effects of the heat itself, besides the loss of the salts of the tissues, through the excessive colliquative perspiration, prove exceedingly depressing to the vital powers. Not only is this condition of extreme debility very depressing in itself, but it also predisposes the victims to attacks of disease which they would otherwise be able to resist. Thus, towards the latter part of the heated term, we have a long list of protracted, exhaustive fevers, for the fatal issue of which the extreme debility of the patients is largely responsible.

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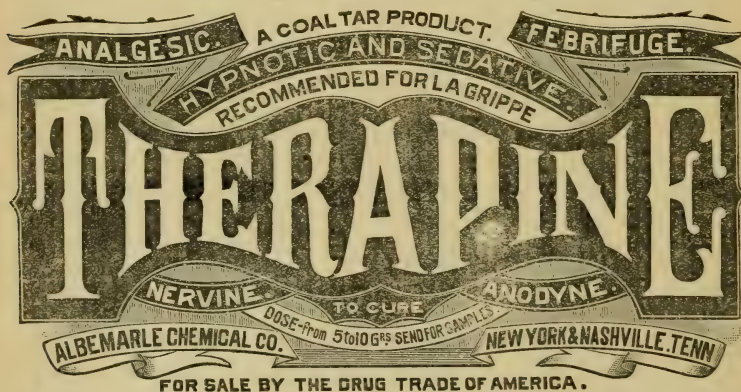
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Charlotte Medical Journal.

VOL. III. CHARLOTTE, N. C., SEPT., 1893. No. 3.

Original Communications.

Acute Anterior Poliomyelitis.

*A Clinical Lecture Delivered at the N. Y. Post Graduate Medical School,
July 24th, 1893.*

BY JOSEPH COLLINS, M. D., Attending Physician to the Hospital for Nervous Diseases,
and Neurologist to the Demilt Dispensary.

Gentlemen :—To day I shall ask your attention for the consideration of a disease which, although not an uncommon one, is frequently overlooked in its incipency and mistaken for other diseases later on. I refer to the disease known as acute anterior poliomyelitis, or as it is sometimes called, the essential paralysis of children. It is unnecessary for me to say that the latter appellation is a misnomer, for you have all probably seen the disease in adults. It occurs, however, with such preponderating frequency in young children that this latter term is, therefore, retained.

Just at present we have attending the clinic quite a number of these cases, and this is a repetition of our experience each summer. The majority of cases of this disease occur between June and September. This is so for the reason that it is during that portion of the year that young children are liable to intestinal disorders, disturbances of digestion and other conditions that favor the development of infectious and septic disease. It is at this season, also, that serious chilling is most liable to occur, but I must add in the same breath that "catching cold" is rapidly loosing its grip on this disease as a causative factor, as it is on all other inflammatory diseases. I am aware of the fact that inflammation of the cord has been produced artificially by freezing the skin of the back with the ether spray, but I am not convinced that inflammation of the cord can arise from cold alone. The most potent factor in the causation of infantile paralysis is some infection. It matters not whether this infection be a primary or secondary one, the fact still remains

that when the etiology of each individual case of anterior poliomyelitis in children is diligently inquired into some toxic condition such as measles, scarlatina, dysentery, diarrhœa, malarial fever, etc., has preceded its appearance. Accidents occurring concomitantly with the disease, or just preceding it, should not be regarded with too much suspicion and looked upon as etiological factors. Such for instance as teething, blows, falls and other trauma. When these are not of sufficient severity to have fever as an integral they are not of sufficient importance to be worthy of mention.

The first little patient that we have here illustrates how closely the development of the disease is associated with infection, and also shows how necessary it is to carefully inquire into the previous history, immediate and remote, of these patients.

The little girl is seven years old and is brought here to-day for the first time. The mother tells us that she is the seventh child of healthy parents. She has always been a bright, lively child, talked early and began to walk when one year old. When she was a baby she had scarlet fever and about two years ago she had malaria and pneumonia. During the past winter she has been troubled a good deal with eczema capitis. Until about a month ago she was quite well, then very suddenly one evening she complained of headache and pains all over, and was extremely restless, peevish and irritable, and had a very high fever. The mother says that the little one's eyes were reddened and much swollen, and that she looked very peculiar. These symptoms subsided and were followed by a rash which the mother took to be a form of prickly heat, because the child felt better just so soon as it appeared and because it seemed to go away after bathing the child a few times with saleratus water. As you know, it is no unusual thing for people in the walk of life of this family to neglect calling a physician unless the symptoms become extreme, therefore it was that this child had no medical aid. There can scarcely be any doubt, however, that the child had one of the exanthemata and measles most likely. Some few days after this she began to complain again of headache and weakness all over and fever, and with this a weakness in the legs and loss of strength in the arms, and this has progressed until we find her as she is now. As you see, the little patient is rather pale and thin. When we examine the legs we notice that they particularly are small, and though we have not

seen the child before, the mother's statements regarding the atrophy of the legs can be taken. Strength is also diminished in the upper extremities, the right side more than the left. As you see, she is unable to stand alone and when I lift her off the floor the toes drop down, giving a rather typical foot drop. The knee jerks are profoundly altered, that on the left side being quite absent, while on the right it is perceptible, but very weak.

You see that the child does not object to being handled, so there is no tenderness, nor is there any analgesia. The mother tells us that in the beginning the patient complained that it hurt her to pass water and that the bowels were somewhat constipated. These, with pains and cramps in the limbs, are not uncommon in the early part of the disease, but they are of short duration and can scarcely be said to be a part of the history of the disease. The electrical changes found in this patient are those ordinarily found in cases that have progressed into the third stage, or stage of atrophy, that is a marked lessening of the faradic irritability, but not a complete loss and a much less marked loss of galvanic irritability. In this case there are not as yet what is known as polar changes. You know that in a normal state the muscles respond most readily to the cathodal closing contraction, that is the negative pole, and when the positive pole is used a stronger current must be applied. Now applying a current to the right anterior tibial muscle we find that the minimum current necessary to give a contraction with the negative pole is gotten from ten cells. While to produce a similar contraction, using the anode, or positive pole, requires twenty cells. On the left side a contraction is produced in the anterior tibial muscle with fifteen cells of the negative pole and twenty-one cells of the positive pole. Now if the condition as regards poles was reversed, as it is frequently, when the disease progresses, we would then have what is known as polar changes. In this case the electrical reactions are harbingers of a favorable recovery, for in those cases where the electrical reactions are profoundly and early changed the outlook for complete recovery is not a favorable one. Of course these patients rarely die from the disease, but in many cases the direct entailment is such as to leave the patient helpless in a greater or lesser degree. I have recently made the autopsy of a young man who suffered an attack of anterior poliomyelitis when an infant, and at the age of twenty-six years, when he died of

Bright's disease, his right upper extremity was no larger than a child's, and it had always been entirely useless.

In glancing over the history of this case then you will see how intimately this exanthemata, from which the patient suffered a few weeks ago, stands in relation to the disease. As the mother states it was not of sufficient severity to require the attention of a physician and unless careful inquiry had been made its previous possession would not have been revealed.

In fact, in a number of cases the most diligent investigation will fail to reveal any factor to which the poliomyelitis can be attributed. This is the case with this bright looking youngster that you see here. She is three years old, the second child of healthy parents, and until eleven days ago she was as strong and vigorous as could be desired. At that time, in the evening, she felt sick, was cross and peevish, and had a very high fever and afterwards perspired freely. The physician who was called said it was something the child had eaten probably, and left the usual prescription. Two days later the mother noticed that the child could not walk, and this has progressed until she became as you see her now, viz: paraplegic. The knee jerks are absent and although the atrophy is not very marked the mother assures us that the child's legs have become very much smaller. This little patient has never had convulsions, has not been exposed in any way so far as they know, nor has she received any falls or other trauma. A year ago she, with the other child, had measles, but it is scarcely possible to attach any importance to this in connection with the present trouble. In this patient there has not been the slightest trouble with the bladder or bowels, and although she is but a mere infant she never soils herself. She has one or two symptoms, however, to which I wish to call your attention. When she is lifted or handled very much, or rubbed, such as after her bath, she cries and rebels violently. Now although infantile paralysis is a disease in which pain is not a symptom, this objection to being handled on account of the soreness of the muscles is not uncommon. Then this youngster will not sit on her bottom, but has a favorite position on the belly or with her head thrown backward. This is very likely due to the muscle soreness of the parts which are ordinarily used for sitting and weakness of the muscles. Still this is only a suggestion, and you must remember that in this disease as a rule the

gluteal muscles are spared and before we can say positively that they are affected we must await farther developments and make a more thorough electrical examination.

In these two cases we have, therefore, the typical picture of acute anterior poliomyelitis. In the first little patient the extent of the pathological process is much greater than in the second. The lesion in this disease is, as you know, an acute exudative, destructive inflammation which expends its effect mostly upon the ganglionic cells of the anterior gray matter. These cells being collected as they are in large numbers in the cervical and lumbar segments suffer most in these locations. In the first patient the anterior gray matter is affected in both the cervical and the lumbar portions, while in the second patient the lesion is confined to the lumbar portion alone. You will remark that the lesion is not limited to the ganglionic cells alone, but is what is usually said to be parenchymatous, using a term that is deservedly becoming obsolete. This is shown very distinctly to be the case by these sections, from the case of ancient poliomyelitis, spoken of previously, that I now pass around.

You will notice that the outline of the anterior cornuæ on one side are much shrunk in contrast with the other of the opposite side. In these specimens also, when examined under the microscope, there is to be seen a preservation of a single column of ganglionic cells near the apex and mesial margin of the anterior cornua, while the cells of the other columns have disappeared almost completely. Where any vestige of them is remaining, their protoplasmic prolongations have disappeared and they are greatly shrunk and atrophied.

The treatment of most cases is deserving of your most intelligent consideration. Unfortunately the neurologist meets a greater number of cases in which he must be content to see the progress of the disease go on unchecked than any other specialist. But that is not so with the disease under consideration. Therapy, properly, intelligently, and diligently applied, can in most cases rob the disease of its most disastrous sequelæ. In the first place, when you are called to see this disease it is well to bear in mind that in a large portion of the cases the causation of the disease is an infection. Now, your object in treatment should be the same here as in every other infection, and that is to get the infection out of the

system, to combat its effects on the system, and to make the patient comfortable. Your endeavor to do these can be most successfully accomplished by giving a small dose of calomel followed by a saline and this followed up by the administration of an antifermentative and antiseptic. For this purpose quinine is most often used, but I must say that I prefer salol in proper doses depending on the age of the patient. Infections are gotten rid of in the system by being thrown off by the emunctories and by being oxidized. By following the plan of treatment that I have advised, you facilitate both of these processes. The little sufferer can be made most comfortable by the external use of cold water, either in the shape of the cold sheet, the cold pack, or by sponging, and the internal administration of small doses of bromide of potassium. Anodynes are scarcely ever required. Counter-irritation over the spine should be applied early and the patient put on a milk diet and kept absolutely quiet. Ice bags to the spine are recommended very highly by many German writers. Rarely is it found necessary to administer antipyretics. After the acute stage has given way to paralysis and atrophy, electricity and massage become the most important therapeutic agents. There is danger that you will begin the use of electricity too early and then not seeing beneficial results follow, after a short course of treatment you will be negligent of its use, or at least I may say you will not be so scrupulous in its use just at a time when its application would be fraught with greatest success. Electrical applications should not be made to any extent until after fever, tenderness and symptomatic reflex phenomena have disappeared. Its use then should begin cautiously and persisted in courageously.

Dr. Hammond has undoubtedly shown you cases of long standing atrophy from poliomyelitis where persistent and continual electrical treatment for many months and even years has been followed by gratifying results. With the use of the galvanic current massage must go hand in hand, one applied in the morning, the other in the evening.

The physician can and should prevent deformities. Those most liable to occur are the various forms of talipes and contracted joints. Deformities of the spine are much more uncommon. Splints properly and timely applied, and if necessary an operation, will, if the suggested treatment be followed, prevent these. As

the patients regain a slight amount of strength in the muscles that are affected, they should be encouraged to use these by indulging in any form of gymnastics that will bring out these particular muscles. Persistence in treatment should be your watchword.

It is unnecessary for me to point out to you the necessity of keeping the general bodily health at its best possible tone. Such knowledge is the alphabet of the therapist's armamentarium.

Dietetic Treatment of Typhoid Fever.

BY ALFRED K. HILDS, M. D., Fellow of the Academy of Medicine, New York.

Dr. W. Beatty, (Hospitals-Tidende, No. 22, 1892,) regards milk as the best and least injurious food, and given with a little soda water, lime water or pure water, it is well borne by the majority of patients. If diarrhoea be present, than it is best to give the remedy boiled, otherwise rather leave it alone. In the meantime one may give peptonized milk. If the patient can take milk it is the best food for all stages of the disease. If the milk is vomited up or passes away undigested, then whey may be given with good results; but if whey be employed, then one must also give beef tea, with the sediment or beef extract, in order to make up the albuminoids. Many object that beef tea causes the development of gas in the intestines, thus increasing the tympanites. The writer, however, can not confirm this. He regards beef tea as a useful supplement of milk when the patient cannot drink enough of the latter, and, besides, it acts as a slight stimulant. Starchy foods may be given, yet the writer does not often employ them. They produce flatulency, may distress the patient and increase the fever, or even bring it on again. They should be avoided when the patient can drink milk. In grave cases the salivary glands are not functioning, and therefore no digestion can take place in the mouth. The pancreas is also probably similarly affected. If starchy food is to be given, then it should be in the half-liquid form. Whipped eggs are given by some physicians, but the writer rarely uses them. Milk is sufficient, and it is doubtful whether eggs can be digested by typhoid patients. Where a patient cannot drink milk then eggs are a necessity. Give them raw, well whipped and thinned. Two or three pints of liquid nourishment in twenty-four hours are sufficient for an adult, and relatively less for a child. Many of the

symptoms of the disease may be managed by taking into consideration the amount and kind of the food.

Diarrhœa.—This is best avoided by not giving too much liquid food. The writer, in his experience, has been but little bothered by this symptom, and he regards its presence as due to incautiousness. Patients have come into the hospital who were suffering from a severe diarrhœa, and, after a restriction of diet were freed from it. It has been his lot to treat constipation oftener than diarrhœa. One should not allow more than two days to pass without the patient having a passage of the bowels, except he has had a severe hæmorrhage from the bowels. At least the second day a passage should be secured in order to prevent the patient from suffering from the retention of feces during convalescence, from which the writer has seen very disagreeable consequences. A restricted diet produces a tendency to constipation, but this is easily removed.

Hæmorrhage.—This is best avoided by a restricted diet. This writer has seen a large number of hæmorrhages where this came on after the patient had drank a large amount of milk. Tympanites is best treated by a restricted diet.

Sleeplessness.—It rarely requires large doses of narcotics, if one avoid too large quantities of nourishment. Patients sleep well on a spare diet. He also thinks that the delirium would be better controlled on such a diet.

High Temperature.—If the temperature runs up to 40° or 40.5° C., it is not advisable to rush to antipyretics, for a cold sponge bath is generally sufficient, and an antipyretic is required only when the temperature is steadily high, morning and evening. A high evening temperature is only of importance when the morning temperature is not one or two degrees lower. The temperature, like the other symptoms, may be controlled by the diet, but it may be asked if this spare diet is sufficient to support the patient. A typhoid fever patient's diet may be regulated by examination of the feces. If coagula of milk be found, then either too much milk has been drunk at one time, or all together, or, again, that the digestive organs are working at a reduced functionability. If the passage of the undigested milk be not stopped, flatulence, diarrhœa, malaise and restlessness, and rise of temperature, will set in. The patient should not have an unlimited supply of drink, as it may cause

diarrhœa. Whatever diet is adopted, that should be held to during the remainder of the disease, as the bowels are very sensitive to a change. Towards the end of the third week, when the ulcers begin to form, the diet should be still more reduced.

A very important question is when the patient may be regarded as convalescent, and when, consequently, a change of diet may be allowed. The following are the points :

Roseola Patches.—If these be present then the disease is still present, though the fever and other symptoms have disappeared.

Temperature.—This must be normal, morning and evening, for at least a week, and if the fall has been sudden then a week is not enough. This is an important sign, as the fever may keep so low while the disease progresses, and again, on the contrary, complications may cause it to rise without a restriction of diet being necessary.

State of the Tongue.—This is of less importance. If it be dry the disease is still present. As a rule it clears up when convalescence sets in, but in a number of cases it remains coated until the patient begins to eat solid food, when it soon clears itself up.

Condition of the Abdomen.—The meteorism must have disappeared.

State of the Spleen.—This is an important point. Except those cases where the spleen was enlarged before the disease, any enlargement is a contradiction to changing the diet. The writer has several times seen patients who were thought to be convalescent, yet, having an enlarged spleen, they had relapses when, with an absence of other symptoms, they were allowed a change of diet. Gerhardt remarks that in cases where relapses occur the size of the spleen had not decreased during the afebrile period. In such cases a relapse is rather a continuation of the original disease than an actual relapse.

State of the Bowels.—If the dejections are liquid and of a light color convalescence has not begun. The pulse indicates nothing, as it may be slow during the entire disease and more rapid during convalescence.

In changing the diet it is to be increased in consistency. A sudden change from a fluid to a solid diet will be followed by fever.

In a few days one may increase the quantity and not the consistency. The writer changes the diet in about the following manner: First, milk, with the addition of barley flour; after a few days a boiled egg, and a few simple biscuits; then bread, followed by fish. The temperature is carefully watched all the time; if it rises it is a sign that the food is too heavy. It is also advisable, even in light cases, to carry out this diet, for in such cases one may be disagreeably surprised by death if a restriction be not placed on the diet.

Phlyctenular-Kerato Conjunctivitis.

Clinical Lecture Delivered by Dr. J. P. Munroe, at North Carolina Medical College, Davidson, N. C.

Written Expressly for THE CHARLOTTE MEDICAL JOURNAL.]

GENTLEMEN—The first patient I show you this morning is a typical case of phlyctenular conjunctivitis, in the primary stage. You will notice on the outer side of the left eye a little papule near the corneal border, surrounded by an inflamed area, the red and enlarged blood vessels radiating outward something like the tail of a comet. We may regard the papule as the head of the comet, and the analogy is carried out in the fact that there is a decided tendency to advance upon and increase the cornea. This is the usual result in neglected cases, and for this reason I use the term Phlyctenular-Kerato Conjunctivitis. This case has existed for only a few days and will doubtless yield rapidly to treatment.

There is nothing in the history of the patient to give a satisfactory clue as to the cause of this inflammation. I am unaware of any constitutional tendency or habit that would predispose to it, unless it is the use of cigarettes, which I have observed not only debilitates the general system, but frequently produces a red, listless eye. Add to this the unusual strain to which this gentleman's eyes have been subjected of late in preparing his examinations, and especially night readings, and we have a combination which will at least be a plausible etiology. The pain and photophobia so far have not been very pronounced, but we might safely predict that if left untreated the cornea would soon become involved, and then photophobia would be very marked. The treatment we shall

adopt is to require rest to the organ and the use of the following prescriptions :

- (1) R Acidi Boracici gr. vi.
 Aquæ $\bar{3}$ ij.
 M Sig. Bathe the eye four times a day.
- (2) R Sulph. Atropia..... gr. iii.
 Cocaine..... gr. v.
 Acidi Boracici..... gr. ss.
 Aquæ..... $\bar{3}$ i.
 M Sig. Drop one or two drops into the eye twice a day.

(N. B.—The first R was discontinued after the second day's use, and the second used alone with a perfect cure as result.)

The second case we have illustrates very forcibly the results of a neglected case of Phlyctenular-Kerato Conjunctivitis. The little papule we noticed in the other case has a tendency not only to invade the cornea, as was stated, but also to break down and form an ulcer. In addition to this, there is a decided tendency to multiplication of ulcers. This is natural, for it is admitted that some constitutional dyscrasia is usually behind these troubles. Tuberculosis most frequently, sometimes syphilis, is the dyscrasia present. In this case there seems to be no doubt of our having a case of the tuberculosis, or as it is called in your text-books, strumous diathesis.

This boy is about ten years of age and has been known on the streets for a year or two as the "red-eyed darkey." You will recollect that when we first brought him before the class his right eye had about nine distinct ulcers on the conjunctiva and cornea, and it was almost totally blind. His left had three ulcers, and in this eye there was considerable photophobia. Both eyes were deeply congested and there was a foul, profuse discharge. The treatment you will recollect as adopted was—

- (1) R Scott's Emulsion of Cod Liver Oil.
 Sig. Teaspoonful three times a day.
- (2) R Acidi Boracici..... gr. xl.
 Aquæ..... $\bar{3}$ iv.
 M Sig. Bathe the eyes three times a day.
- (3) R Yellow Oxide of Mercury..... gr. x.
 Vaseline..... $\bar{3}$ i.
 M Sig. Rub into the corner of the eye a piece the size of a pea once a day.

An alterative tonic is clearly indicated, and the oil is one of the best. A mild but efficient antiseptic was needed to cleanse the

eyes, and for this we have nothing better than the boracic acid, and lastly the yellow oxide of mercury ointment has a distinctly curative action upon the ulcers and should be used in every case that has become chronic. You will notice that our chief reliance in case number one, which was in the acute stage, was atropia and cocaine. In this case, after cleansing the eye with an abundance of water and boracic acid solution, we rely chiefly on the mercury ointment for local treatment and cod liver oil internally, and it must be remembered that the constitutional treatment is quite as important as the local. I have dropped atropia into his eyes occasionally also.

After using this treatment for three weeks we have results that are much better than I had predicted when we commenced. The boy is so much improved that he pronounces himself well. Of course we see his error at a glance, but the condition is a very satisfactory one. We shall discontinue the use of the boracic acid, as there seems to be no further indication for it, but continue the ointment and oil.

If he persists in the treatment he will probably be sufficiently cured to suffer no great inconvenience. There will be a tendency to a recurrence of phlyctenular, however, and there will always be opacity of the cornea, more marked, of course, in the right eye. The consequent dimness of vision may be relieved some by an iridectomy later on.

Treatment of Obesity and Fatty Degeneration.

By G. H. THOMPSON, A. M., M. D., Prof. Materia Medica St. Louis College of Physicians and Surgeons.

It is not necessary to enter into a discussion of what constitutes fatty degeneration, suffice it to say that this condition generally co-exists with a tendency to general obesity or results from the abuse of alcoholics. Those having a tendency to general obesity, are usually partial also to diets rich in sugar and starches, and small amounts of carbo-hydrates added to such diet, greatly favors the deposition of fat. The hereditary tendency to accumulation of fat, in my experience, usually manifests itself in males at the age of thirty, sometimes earlier, sometimes later. In females usually at about twenty-eight. As long as fat serves its functions only—that of adding rotundity to the form and serving as food

supply—in times of sickness there is no necessity of seeking to eliminate it. It is, when it accumulates persistently, causing distress by its weight and interference with locomotion, or when internal viscera become so degenerated by substitution of fat for normal organic tissue, that distress is caused or life threatened, that we should seek to correct its effects.

The members of the Medical Profession doubtless have their own ideas as to whether relief should be given on purely cosmetic grounds, or not, and it is not my intention to discuss this subject from such a standpoint. The question is, how can necessary relief be afforded? In endeavoring to throw some light on this question I take occasion to report a few cases.

Case 1. Mrs. E. aet, 28, weight 138 pounds, height 5 ft complained that she suffered from heat. For two years she has been unable to stand the moderate summer elevations of temperature without great inconvenience. Perspired so freely that she was obliged to remain indoors most of the time between June and September on account of ruining her clothes with perspiration. No female or other trouble was present, but she seemed to have a superabundance of adipose tissue generally distributed, especially about the chest and abdomen. Habits regular, bowels and courses likewise. Concluded to see the effect of reducing her weight, and for this purpose, after trying *Fucus Vesiculus* in the dose of one to two drams of the fluid extract three times a day, with some slight benefit. I determined to try *Phytolacca Decandra*, which has been recommended by Dr. M. M. Griffith, as a potent measure in diminishing obesity. The preparation used was *Phytoline* (Walker) a remedy prepared from the active principle of the *Phytolacca Berries*, after being somewhat frost-bitten. The dose first used was gtt. x v four times a day. The patient used two bottles, after which she reported herself feeling very much improved, perspiration lessened, weight 128 lbs. appetite about the same, regular bowels and courses. I could find no bad effects from the remedy.

Case 2. H. W. M. aet. 33; weight 160; height 5 ft. 6 inches, complained of praecordial distress, difficult breathing, occasional attacks of vertigo, heart-beat feeble, irregular and slow, sometimes rapid, anaemia, weakness in the legs, which were not very muscular. Patient was addicted to alcoholics, suffering consequently from

dyspepsia and atony of the bowels. Diagnosis; Fatty degeneration of the heart due to alcoholism. Stopped his alcoholics, administered stomachic tonic of quinine, strychnine and capsicum, and gave Phytolacca (Phytoline-Walker) in the dose of gtt. x six times a day before and after each meal. In three weeks time there was a notable improvement in every respect. Weight had decreased five pounds, heart-beat fuller and more regular, praecordial distress and difficult breathing ceased altogether, digestion improved, appetite likewise. Patient was on the road to recovery when persistent exposure to extreme cold brought on Pneumonia, from which he died after a five days' illness.

In these two cases there was no advice given as to diet except the withdrawal of alcoholics in the last case, it also being remembered that alcoholics antagonize the action of Pyhtolacca.

Case 3. Mr. N. aet. 54, weight 240, height 5 ft. 10 inches, complained of eczema of the legs and left side. Inspection showed in the left hypochondrium a large circumscribed ulceration about 2 inches in diameter, surrounded by inflamed vesiculararea; the legs showed similiar ulceration in the skin. Patient perspired freely, almost to a point of hyperidrosis. During cold weather patient was not troubled except from difficult locomotion and occasional attacks of rheumatism. Examination of urine showed no sugar. Appetite fair, drank considerable beer, bowels regular. Astringent salves and lotions cured temporarily. Diagnosed eczema, due to maceration. Placed patient on Phytolacca (Phytoline Walker's, gtt. x-x-v before and after each meal. In two weeks patient lost 10 pounds, had somewhat less appetite, less perspiration, sores took on a healthier condition and after continuing the treatment about two months and a half, patient felt as well as ever, and tipped the beam at 200. Since then the patient has gained but little if any, perspires normally and has no return of his eczema and no recurrence of rheumatism. How long this condition will last, time alone can tell.

This last case was one, especially calling for some fat reducing agent, and the checking of perspiration. In this case bread and potatoes were prohibited, likewise other form of starchy foods; beer was reduced in quantity, two-thirds. These measures materially increased the fat reducing properties of the Phytoline.

The next question is, how does Phytoline cause the reduction

of fat? This, I am at present unable to say. I have, however, noticed that the faeces seemed to be considerably more rich in fatty materials than is normal, which condition cannot be attributed to indigestion, as in all other respects digestion was normal. Perspiration and urine was apparently unchanged by the action of the drug.

Officinal preparation of the root have been used with little or no result, except to cause continued nausea, vomiting and diarrhœa. Phytoline does not cause nausea in the ordinary dose, and though slight laxative effects have been observed from it, I have never seen a pronounced case of diarrhœa. The appetite is sometimes slightly diminished, chiefly in the morning. It seems to me to be specially indicated in all diseases characterized by fatty degeneration of internal viscera, especially of the heart and liver. Those who chose to use it for its cosmetic effects in reducing fat, will also find in it a serviceable adjunct to properly restricted diet and exercise.

**Phenol-Bismuth, Cresol-Bismuth, Betanaphthol-Bismuth,
Tribromphenol-Bismuth, Pyrogaliol-Bismuth.**

In a paper published in the "Archives des Sciences Biologiques," Vol. II, No. 2, Dr. M. F. A. Jasenski reports experiments made in Prof. Nencki's laboratory at the St. Petersburg Imperial Institute for Experimental Medicine. As the results derived from these experiments, Dr. Jasenski publishes the following conclusions:

1. Phenol-Bismuth, Cresol-Bismuth and Betanaphthol-Bismuth, when introduced into the stomach, are decomposed by the gastric juice into Phenol, Cresol or Naphthol on one hand and Bismuth on the other; some of the preparation which has not had sufficient time to be decomposed in the stomach, passes on into the intestine where the conditions are also favorable to its complete decomposition on account of the acid reaction of its contents and the presence of the pan-creatic juice.

2. Phenol and Cresol, after being separated from the Bismuth, are absorbed completely by the intestine and eliminated with the urine in the form of sulfocarbolic or cresylic acid, or combined with glyco-uric acid. Naphthol, on the other hand, is only par

tially eliminated with the urine, the remainder passing through the whole digestive canal and being excreted with the fæces.

3. Bismuth is almost completely excreted with the fæces (96.4 per cent.) as Sulphide of Bismuth, none of it being found in the urine. This is different in the dog, as the gastric juice of this animal contains much more hydrochloric acid than that of man. A small quantity of Bismuth, therefore, is here transformed into the soluble chloride, reabsorbed and eliminated with the urine, while the greater part passes away with the fæces in the form of sulphide, as in man.

4. In spite of the toxic properties of the Phenols, etc., none of the three preparations has had the least injurious effect, although they were administered for three weeks in daily doses of 5.0 gms. (75 grains) to man and of 10.0 gms. (150 grains) to dogs. This is probably due to the slow separation of the Phenols, etc., from the Bismuth.

I had previously shown by various observations that all combinations of the Phenols with Bismuth, always arrest the development of bacteria, if they do not actually kill them. These results, together with those detailed above, certainly justified me in assuming that these preparations would have a beneficent influence in various diseases of the gastro-intestinal tract, more especially in those which are caused (typhoid fever, cholera Asiatica) or those which are prolonged (chronic intestinal catarrh) by the action of micro-organisms. Thus, I deemed it advisable to try these preparations on patients suffering from those diseases. Prof. Pasternatski, whom I approached on the subject, was kind enough to permit my making these trials at his clinic; there I have made, under his supervision, a series of observation, the results of which will be succinctly stated forthwith.

Six cases of acute gastro-intestinal catarrh were cured within from two to five days after having taken 1.0 to 3.0 gms. (15 to 45 grains) daily of Phenol-Bismuth and Betanaphthol-Bismuth.

In a case of acute proctitis, Phenol-Bismuth was given in enemata 2.0 gms. (30 grains) to 60.0 gms. (2 oz.) of water—the patient being completely cured after the administration of two enemata on two consecutive days.

In a majority of cases of chronic intestinal catarrh, even in those of several month's standing, Phenol-Bismuth and still more Beta-

naphthol-Bismuth had a very beneficial effect. One case out of five did not give satisfactory results. I prescribed for those patients daily doses of from 3.0 to 4.0 gms. (45 to 60 grains). It is easily understood that in this latter group of cases the treatment was of somewhat longer duration. One patient who had suffered with intestinal catarrh for a year, who had severe colicky pains and from three to four diarrhœal passages a day, was in a very weak condition; he was cured within one month's time by the administration of from 2.0 to 3.0 gms. (30 to 45 grains) of Phenol-Bismuth daily. I have seen this patient three weeks after his discharge from the hospital; he felt perfectly well, neither the diarrhœa nor the pains having returned. He had the appearance of being entirely cured: he had gained flesh and had red cheeks. As he was afraid of a relapse, he continually observed a strict diet. I have had the identical good result with Betanaphthol-Bismuth in a patient with chronic intestinal catarrh. Two patients with cirrhosis of the liver, who complained very much of diarrhœa and abdominal pains were also successfully treated with Phenol-Bismuth and Betanaphthol-Bismuth. One of them left the hospital before the diarrhœa had completely ceased, while the other after from 12 to 15 days' treatment did not complain any more of diarrhœa and pains. A case of cancer of the stomach, with eructations and vomiting, I succeeded to benefit greatly by combining stomach washing with the internal exhibition of from 0.5 to 2.0 gms. ($7\frac{1}{2}$ to 30 grains) of Phenol-Bismuth. The distressing symptoms disappeared then, while washing out the stomach had not been able to effect this. Unfortunately I have not been able to continue these clinical observations; yet the results obtained encourage me to hope that the use of combinations of the Phenols, etc., with Bismuth will give excellent results in the treatment of acute and chronic diseases of the digestive canal as well as in the various infectious diseases, such as typhoid fever, cholera, etc. Certainly these results will be better than those obtained with the older preparations of Bismuth which have so far been in general use.

Tribromphenol-Bismuth has been recommended by Prof. Hueppe in a paper, published in the "Berliner Klinische Wochenschrift," 1893, No. 7, as a specific against Cholera Asiatica. It is described as a yellow, neutral, insoluble powder, destitute of odor and taste, nearly non-poisonous, indifferent to mucous membranes and the

organs of digestion. It contains 49.5 per cent of Bismuth Oxide besides 50 per cent. of Tribromphenol. The daily dose for adults is 5 to 7 gms. ($1\frac{1}{4}$ to $1\frac{3}{4}$ drs.) given in single doses of one-half gm. ($7\frac{1}{2}$ grns.) Tribromphenol-Bismuth it is said possesses powerful bactericidal properties—probably uniting the cholera poison with the Bismuth, and transforming it into a non-poisonous and non-absorbable substance, and it protects the denuded intestinal mucous membranes against the development of the cholera-bacilli. Betanaphthol Bismuth has also been designated by Hueppe as a most powerful intestinal antiseptic. It contains 80 per cent. of Bismuth Oxide. It is a neutral, brown, odorless, non-caustic powder, insoluble in water and decomposed into its component parts in the intestine, the Betanaphthol being absorbed and discharged with the urine, while the Bismuth is evacuated with the stools. The dose is 1 to 2 gms. (15 to 30 grains). Pyrogallol-Bismuth is the most remarkable of these various Bismuth compounds. It has the advantage to resist the action of acids, while it dissolves in alkaline liquids, the intestinal juices more especially.

Antiseptic Treatment of Typhoid Fever.

The internal administration of antiseptic agents has given me good results. Following the line laid down by Dr. E. K. Maxson, of Syracuse, N. Y., in the Medical Index, some years ago, I have made frequent use of sulpho-carbolates of zinc and sodium, giving the drugs every four to six hours, in doses of five grains each. Sometime ago in the Medical Index, Dr. T. M. Wilson, of Thornton, Texas, reported admirable results in the treatment of typhoid fever by nitrate of ammonia. Supportive and other necessary measures are supplemented by :

R. Ammonii nitratisdrams ij
 Lix. potassii arsenitis..... fluid drams j
 Aquæ distillat.....fluid ounce iij
 ℞. Sig.—Teaspoonful every three hours.

This also has given the very best satisfaction. Of course no one claims that these antiseptics will really abort an attack of true typhoid fever, but they certainly do prevent the appearance of septicemic symptoms, and in most cases of typhoid we have nothing but a true septicemia after the end of the second week. So when we give these drugs (in conjunction with proper food and baths if

indicated) we quite often have our patients convalescent by the third week instead of the fifth or sixth as under old lines of treatment. Salol has been the drug most relied upon next to the sulphocarbolate of sodium, but any of the antiseptics that exert their influence in the intestinal canal rather than in the stomach will prove satisfactory. When there is much diarrhœa I give :

R. Bismuthi salicylat.....gr. xij
 Salol.....scruples i
 Pulv. opii.....gr. ij
 ℞. et. ft. pulv. no. iv. Sig.—One every four hours.

I try the prescription first without the opium, then with it if the fetid discharges still continue.

Under this line of treatment only two of my cases died, one from perforative peritonitis, the other from œdema of the lungs. In the first case I should have called a surgeon to make a laparotomy had I been notified of the condition early enough ; but rupture took place about mid-night and I was not summoned until near 10 a. m., when the subject was too near dead to warrant surgical interference, which is the only rational treatment of perforative peritonitis.—C. H. MAJORS, M. D., of San Francisco, Cal., in *Kansas City Medical Index*.

Antikamnia.

The advantages of this preparation over most others is in its combinations with other medical agents perfected by its manufacturer, in tablets of doses to suit the demands of a given case, for example, the Antikamnia Chemical Company will supply the physician with one, two, three, five and ten grain tablets in combination with quinine, salol and various other drugs, so that a prescription may be filled by the tablets alone. This Company has for a long time been enjoying a well deserved *boom* and the kind of a boom that *keeps on booming*. For further particulars, address the Antikamnia Chemical Company, St. Louis, and mention this Journal.

The "Compound Talcum Baby Powder," prepared by Julius Fehr, M. D., Hoboken, N. J., contains antiseptic, antizymotic and disinfectant properties. As a sprinkling powder or application in various affections of the skin, it stands without a rival. See ad. and give it a trial.

SYR. HYPOPHOS. CO., FELLOWS

Containing the Essential Elements of the Animal Organization—Potash and Lime;

The Oxidising Agents—Iron and Manganese;

The Tonics—Quinine and Strychnine;

And the Vitalizing Constituent—Phosphorus; the whole combined in the form of a Syrup with a **Slightly Alkaline Reaction.**

It Differs in its Effects from all Analogous Preparations; and it possesses the important properties of being pleasant to the taste, easily borne by the stomach, and harmless under prolonged use.

It has Gained a Wide Reputation, particularly in the treatment of Pulmonary Tuberculosis, Chronic Bronchitis, and other affections of the respiratory organs. It has also been employed with much success in various nervous and debilitating diseases.

Its Curative Power is largely attributable to its stimulant, tonic, and nutritive properties, by means of which the energy of the system is recruited.

Its Action is Prompt: it stimulates the appetite and the digestion, it promotes assimilation, and it enters directly into the circulation with the food products.

The prescribed dose produces a feeling of buoyancy, and removes depression and melancholy; *hence the preparation is of great value in the treatment of mental and nervous affections.* From the fact, also, that it exerts a double tonic influence, and produces a healthy flow of the secretions, its use is indicated in a wide range of diseases.

NOTICE -- CAUTION.

The success of Fellow's Syrup of Hypophosphites has tempted certain persons to offer imitations of it for sale. Mr. Fellows, who has examined samples of these, **finds that no two of them are identical**, and that all of them differ from the original in composition, in freedom from acid reaction, in susceptibility to the effects of oxygen when exposed to light or heat, **in the property of retaining the strychnine in solution**, and in the medicinal effects.

As these cheap and inefficient substitutes are frequently dispensed instead of the genuine preparation, physicians are earnestly requested, when prescribing the Syrup, to write "**Syr. Hypophos. Fellows.**"

As a further precaution, it is advisable that the Syrup should be ordered in the original bottles; the distinguishing marks which the bottles (and the wrappers surrounding them) can then be examined, and the genuineness—or otherwise—of the contents thereby proved.

Medical Letters may be addressed to

Mr. FELLOWS, 48 Vesey Street, New York.

Charlotte Medical Journal.

E. C. REGISTER, M. D.,

J. C. MONTGOMERY, M. D.,

Editors and Publishers,

No. 36 SOUTH TRYON STREET,

CHARLOTTE, N. C.

✱ SUBSCRIPTION. \$2.50 PER YEAR. ✱

Articles intended for the Original Department of the Charlotte Medical Journal will be accepted only with the understanding that they are contributed to it exclusively.

HAMBURG allows no Russian to enter her territory unless provided with a through ticket to America.

AT the meeting of the North Carolina Pharmaceutical Association, recently held in Greensboro, Dr. N. D. Fetzner, of Concord, was elected president.

DR. J. M. HAYS, of Oxford, N. C., we hear is soon to locate in Greensboro, N. C. The Doctor is one of the most prominent physicians of this State, and we feel confident that he will soon enter into an extensive practice.

BY a vote of twelve to nine the Faculty of the Harvard Medical School decided not to ask the co-operation of the university for authority to admit women to graduate courses if at any time or in particular cases it should wish to do so.

THE Globe Nebulizer is one of the late inventions of Dr. H. M. Dunlap, of Battle Creek, Michigan. The Globe Nebulizer is a first-class and practical instrument for treating diseases of the nose, throat and lungs. It vaporizes balsam oils and all kinds of aqueous solutions. Refer to the cut of same among our advertisements. This instrument is especially adapted to the use of children.

WE hope ere this our readers have become familiar with the Highland Mineral Spring Water. It has been carefully analyzed and its ingredients are well known. It is the softest and purest water known; contains iron in combination with alkalies; comes from a region free from malaria. Sold in glass only and may be obtained from druggists. Try it.

DR. GEO. B. FARRIOR, recently of this city, has been appointed visiting physician to the insane department in Blackwell's Island Hospital of New York. This is quite a promising position. We are sorry to have the Doctor depart from among us, and we trust his appointment will be both pleasant and profitable.

LISTOL, the new chemical compound of thymal and iodine, is a perfect substitute for iodoform, with the advantage that it is free from disagreeable odors. It is manufactured by the well known pharmaceutical chemists, Chas. M. Posey & Co., of Chicago, Ills. We have thoroughly tested the antiseptic properties of Listol, and it is our pleasure to recommend it to our readers.

DR. WM. GOODELL, professor of gynæcology in the medical department of the University of Pennsylvania, has resigned, owing to the growing demands made upon him by his private practice. The trustees accepted his resignation with regrets. Dr. Goodell was elected honorary professor of gynæcology. The vacancy caused by the resignation of Dr. Goodell has been filled by Dr. Chas. Puerose.

MUCH is learned by the careful perusal of our advertising pages. The physician who regularly scans the pages of a medical Journal devoted to advertising, keeps himself posted as to the latest and best remedies and pharmaceutical preparations, as well as the improvements in surgical methods, etc., and consequently possesses advantages over his neighbor who does not do so. Always read the advertisements.

THE advertisement of Sennine, The New American Antiseptic, appears for the first time in this issue. A product of phenol and boracic acid, the two best germicides known—in powder form, (2 oz. tin boxes with inner top perforated convenient in applying on the wood surface) and readily soluble—five parts of Sennine dissolved in 100 parts of water. Comparatively inexpensive, non-poisonous and free from disgusting odor; safe internally as well as externally, thus promising much in general medicine as well as in surgery. We bespeak an early trial of Sennine by our patrons. Free sample sent upon application to the Dios Chemical Co., St. Louis, Mo.

THE "Chicago Polyclinic" is thoroughly fitted for Post Graduate Instruction. Its hospital contains 100 beds which naturally gives an abundance of clinical material. The Polyclinic has a special arrangement with several large hospitals allowing the admission of their matriculates only. During the World's Fair prominent doctors from Europe will hold lectures there. Dr. Moreau R. Brown, Nos. 174, 176 Chicago avenue, will give full particulars on application.

A pamphlet just published by the Sanitas Manufacturing Company, of New York, on the germicidal action of the "Sanitas" preparations upon certain disease germs and the ptomaines (animal alkaloids) by Dr. Griffiths, has just been issued and has been commented upon favorably by many prominent New York doctors. Dr. Griffiths, in a series of experiments, impregnated silk threads with certain microbes and then immersed them into "Sanitas Oil." He found that the microbes of consumption, scarlet fever, typhoid fever, cholera, diphtheria and glanders were destroyed within ten to forty-three seconds. The destruction in each case was proved by inoculating tubes containing various nourishing media, but no growths made their appearance in any of the tubes after the lapse of several weeks' incubation at the temperatures most suitable for the growth of each of the above mentioned microbes.

A CODE OF ETHICS.

WILL this subject never have an end? Is it to be a current topic or theme for editors of Medical Journals to write, and write, and write. It has become as sickening and disgusting and stale and is as much appreciated as is a hand organ on the corner of Broadway and Fifth Avenue playing Annie Rooney, or down went McGinty.

The squib below is from the New York Times, and if applied will be the best code and only code needed:

The American Medical Association is still at work upon the old subject, a Code of Ethics for a profession whose individual members are not considered gentlemanly enough by confreres to furnish their own code, but are required to be placed in the leading strings of an association to keep them within the bounds of decency and common honesty. The committee on the Code of Ethics, presented

at the last meeting of the Association a majority and minority report, neither of which was acted upon. The majority report in spirit recommends the individual conscience as a sufficient code, while the minority have not the same confidence in their brethren and insist that the code with its restrictions and fraternal advice stand as it is. The Medical Record in speaking editorially upon the subject says what we most heartily endorse, "We doubt if any good will come from continuing to discuss these questions. We prefer to teach the gospel of virtuousness and let the details be determined by the individual conscience. The individual conscience, we may add, is setting strongly towards consulting with all qualified practitioners who enjoy a reputation for honesty among their fellow men."

And to this conclusion we presume all sensible men will come at no distant day.

FEEDING IN FEVERS.

Dr. Peabody believes that in all kinds of illness, and especially in fevers, attention must be paid to the appetite and desire of the patient. If a patient is really hungry, solid food of a properly selected kind, and in judicious quantities, will rarely disagree with him. He believes there is less danger in doing harm to an ulcerated ileum in typhoid fever by giving finely divided egg, beef or chop than by giving milk. He habitually gives his patients with typhoid, who are hungry, such food. He believes it is a mistake to withhold solid food merely because a patient has fever, and that it is incorrect to regard milk as a fluid food. He also says that milk will always remain the most serviceable general food in disease, but where it fails to nourish the patient, where it is not well borne, where it cannot be taken for any reason, it is well to remember that efficient adjuncts and substitutes are within reach. While the Doctor's views on most medical subjects are considered good by the profession, in this particular I consider his opinion incorrect, and in actual practice its fallacy can be demonstrated in any case of typhoid fever. Milk is not only a liquid food, but the best diet we have for typhoid fever patients. Of course its indiscriminate administration is calculated to do much harm. It is seldom that I find a patient that will take over two ounces of milk at a time without manifesting symptoms of indigestion. Several

years ago when Loomis, Flint, and nearly all of our leading authors, were in the habit of recommending three or four pints of milk to a typhoid fever patient a day, it was much more common to hear them complain of pain in their stomachs than it is now, when we are more moderate in its use. As to solid food, any physician who will give it in typhoid fever has either had but little experience, or is a very poor observer.

THE Richmond Dispatch has the following to say of Dr. J. W. Long, of Randleman, N. C., who was recently elected Professor of Diseases of women in the Medical College of Virginia :

"Dr. Long was born in Randolph county, N. C., in 1859. He received his diploma from the medical department of the Vanderbilt University in 1883, and later graduated from the medical department of the University of Nashville. He has pursued post-graduate studies in the New York Polyclinic and the various hospitals of that city, and is a member of the Randolph County Medical Society, the North Carolina State Medical Society, and the Southern Surgical and Gynecological Association. He has contributed liberally to the literature in the transactions of the above-mentioned societies and to the North Carolina Medical Journal, the Maryland Medical Journal, the American Journal of Obstetrics, and various other periodicals. Dr. Long has won for himself the reputation of being a careful observer, a skilful practitioner, and a conscientious and honest worker in his practice."

DR. J. A. ARDREY, of Pineville, N. C., died very suddenly, of apoplexy, on August 21st. He was 41 years of age and was one of the best known physicians of the county. Not only was he one of the leading physicians of his town, but also a fine business man, being at the time of his death President of Pineville Cotton Mill.

Address the S. B. Medicine Co., South Bend, Ind., for "Cocaine Compound," used in urethral and rectal diseases ; "Elixir of Iron," an agreeable reconstructive tonic ; "Iron Wood Tonic," good for indigestion and weak stomach ; "White Pine Expectorant," an efficient cough syrup ; "Caffacemon" tablets for headache, etc. These preparations will give the best of satisfaction when properly used. See advertisement.

BOOKS REVIEWED.

A CHAPTER ON CHOLERA FOR LAY READERS: History, Symptoms, Prevention, and Treatment of the Disease. By WALTER VOUGHT, Ph. B., M. D., Medical Director and Physician-in-Charge of the Fire Island Quarantine Station, Port of New York; Fellow of the New York Academy of Medicine, etc. Illustrated with Colored Plates and Wood Engravings. In one small 12mo. volume, 110 pages. Price 75 cents net. Philadelphia: The F. A. Davis Co., Publishers, 1914 and 1916 Cherry Street.

This is a very valuable little book upon a subject that interests all just at this time, and is written by a physician who has had experience and special opportunities to study this disease, and his writings and sayings are of great import. It not only interests the medical profession, but also the laity, and it is for that class of people that this work has been written. After giving a complete and thorough definition of cholera, the author gives a brief history of this disease, tracing it from India, its birthplace, through its migrating course, at different periods, finally landing it in America. The causes, symptoms, treatment and prevention of this disease are clearly given. It further describes in detail the method of handling an outbreak of cholera on shipboard. This is a most important chapter, for one cannot tell at what time he may be called upon to take charge of an infected ship, and it is a well established fact that in many instances the introduction of cholera has been the consequence of the inefficient administration of the ship surgeon. The book is printed in very large type, on good paper, is easily read, and contains 110 pages. It is well worth reading and it is to be hoped that it will find ready sale. I feel sure it will.

STRICTURE OF THE URETHRA. By G. FRANK LYDSTON, M. D., Professor of Surgical Diseases of the Genito-Urinary Organs and Syphilology in the Chicago College of Physicians and Surgeons; Attending Surgeon to Cook County Hospital; Fellow of the Chicago Academy of Medicine and of the Southern Surgical and Gynæcological Association, etc.

Literature upon this subject is not so abundant and plentiful as that of other subjects, and yet it is none the less important. There is no complaint with which the physician has to contend that should be more properly and thoroughly understood and none the treatment of which is more beseechingly and earnestly sought than stricture of the urethra. The author's experience upon this subject has been very extensive and almost unlimited, and eminently fitted him to accomplish the above work so successfully. In the opening chapter he describes the anatomy of the urethra

minutely, giving many illustrations which aid greatly in getting a better understanding of the text. The author handles this subject from every conceivable standpoint. After treating of the varieties of stricture, the diagnosis and prognosis, he then enters upon the important subject of treatment. The author says: "In no disease of the genito-urinary tract is attention to genito-urinary and sexual hygiene more essential than in the management of stricture of the urethra." As to the methods of treatment, the author gives the following: Caustics, continuous dilatation, gradual dilatation, dilating urethrotomy, external urethrotomy, external perineal section without a guide, electrolysis, subcutaneous section, excision, with or without a plastic operation. The chapters on treatment of stricture by dilatation and internal urethrotomy are both well written, clearly defined, and are most important. The methods herein stated and fully explained will be safe guides to any who may contemplate either of these methods for the cure of this troublesome and often dangerous malady. The work is gotten up in superb style; it contains seven full-page plates and eighty-five wood cuts. It is printed on the best paper and presents a neat and handsome appearance. It affords us great pleasure to recommend this book to our readers. Price, \$3. The W. T. Keener Co., publishers, 96 Washington street, Chicago; 1893.

"DARWIN, AND AFTER DARWIN"—An Exposition of the Darwinian Theory and a Discussion of Post-Darwinian Questions. By GEORGE JOHN ROMANES, M. D., LL. D., F. R. S. 1.—The Darwinian Theory. \$2.00. Chicago: The Open Court Publishing Co. 1892.

The author of the above work spent three or four years lecturing in the University of Edinburgh, and it is his intention to have these lectures published in three volumes. The volume before us is a systematic exposition of what may be termed the Darwinism of Darwin, and as on this account it is likely to prove of more service to general readers than to professional naturalists, the author has been careful to avoid assuming even the most elementary knowledge of natural science on the part of those to whom the exposition is addressed. The work is divided into ten chapters, as follows:

Chapter 1—Introductory.

Chapter 2—Classification.

Chapter 4—Morphology. This is a very interesting chapter,

containing many illustrations and cuts showing the bony framework of vertebrate animals that had been modified by necessity of adaptation to new environments, the seal and whale being given as examples.

Chapter 4—Embryology. This the author thinks the most important of the lines of evidence, not only in favor of the general facts of evolution, but also of its history.

Chapter 5—Palæontology. This chapter is devoted to a consideration of the evidence of organic evolution, which has been furnished by the researches of geologists.

Chapter 6—Geographical Distribution. The author deems this chapter also a strong argument in favor of evolution. He very ably discusses it and presents his points clearly.

Chapter 7—The Theory of Natural Selection.

Chapter 8—The Evidences of Natural Selection.

Chapter 9—Criticisms of the Theory of Natural Selection.

Chapter 10—The Theory of Sexual Selection, and concluding remarks. The work contains 460 pages, is neatly gotten up, and contains many illustrations, some of which are very pretty and attractive.

THE STORY OF GOVERNMENT. By HENRY AUSTIN. A condensed novel of human history. Fascinating, instructive, authentic. 200 engravings. Endorsed by such eminent people as Edward Everett Hale, Mary A. Livermore, Vicar-General Byrne, General Doug as Frazer, Edward Bellamy, and others. Publishers: A. M. Thayer & Co., Boston, Mass., 148 High Street. Agents wanted.

It has afforded me great pleasure to review this excellent book. Its pages abound in strong sense, vigorous thoughts, sprightly wit, happy humor, clothed in chaste diction, fresh with the breath of health and progress. Probably no one is more peculiarly fitted for the task so admirably accomplished in the fascinating story of government than the above writer. He has traveled very extensively, has a great fondness for books, is a close observer, and is a smooth and easy writer. This work treats of evolution and government, as traced from animals to savage tribes, upwards through successive stages of barbarism and civilization. He who has not read this book has a great treat in store for himself. From beginning to end it is filled with most valuable information, written in such an attractive style that some portions are romantic and novel-like. This work of 900 pages is most beautifully illustrated and cannot fail to obtain a wide and popular circulation. It carries you

through Gypsy and Brigand Life, through Feudalistic Monarchy, Absolutism, The Rule of Chaste, Paternal Socialism, Theocracy, etc. Woman in Government forms a most interesting chapter. On the whole, it is one of the most readable and instructive works that has recently been published. It is a pleasure to strongly recommend this work as one that will please and delight the reader.

MINERAL SPRINGS AND HEALTH RESORTS OF CALIFORNIA, with a complete Chemical Analysis of every important Mineral Water in the World. A Prize Essay—Annual Prize of the Medical Society of the State of California, awarded April 20, 1889. By WINLOW ANDERSON, M. D., M. R. C. P. Lond., and M. R. C. S. Eng., etc. 8vo., pp. 384. Illustrated. [San Francisco: The Bancroft Co., 1892. Price, \$1.50.

This is certainly a complete and interesting work upon the subject chosen. Great praise is due Dr. Anderson, after diligent research and labor, in showing to the profession and the laity the high excellence in quality with which the springs of our own country are possessed. The book is written in a very pleasant and agreeable style, copiously illustrated, thus aiding greatly in presenting scenes of the most dazzling description. Some portions of the work are so graphically described, and existing in such numbers, that a prospective visitor would be puzzled in making a choice. One of the advantages of the book to physicians is that it gives the analyses of all the important Mineral Springs of the world. The work is printed in large clear type on good paper and neatly bound. The price has been placed within the reach of all, only \$1.50. The book is well worth the money.

RECTAL AND ANNAL SURGERY, with a Full Description of the Secret Methods of the Itinerant Specialist. By EDWARD ANDREWS, M. D., LL. D., Professor Clinical Surgery Northwestern University Medical School; Surgeon Mercy Hospital, etc.; and EDWARD WYLLIS ANDREWS, A. M., M. D., Professor Clinical Surgery Northwestern Medical School, Surgeon Mercy Hospital, etc. Third Edition. Revised and Enlarged, with Illustrations and Formulary. Chicago: W. T. Keener, 96 Washington Street; 1892.

Physicians as a class have greatly neglected the study and treatment of the common affections of the anus and rectum, and left a field open for quacks and so-called experts to do their great work. This book treats of all the diseases common to the rectum and anus. The work opens with a description of the anatomy and physiology of the rectum. Following this is the chapter on the Methods of Examining the Rectum. The illustrations under this chapter are good. Hæmorrhoids, or piles, is next treated. The author's description of this complaint is excellent. He gives the

many treatments that are now employed. The history of the hypodermic method of treating piles and the manner in which this broad treatment traveled, is very interesting. Proctitis, fissure of anus, abscess and sinus, prolapse of rectum, are all fully described and the treatment presented in a careful manner. The book closes with a good appendix and formulary. With this formulary for reference, the practitioner who has once read the book can, by almost instantaneous reference, secure the necessary details for the treatment of any given case which is before him. The book contains 105 pages and is gotten up in a convenient and elegant style. Few books are more neatly and substantially made than W. T. Keener's. The book is cheap, and we hope our readers will purchase at once. \$1.50.

ELECTRICITY IN DISEASES OF WOMEN AND OBSTETRICS. By FRANKLIN H. MARTIN, M. D., Professor of Gynecology Post-Graduate School of Medicine; Attending Surgeon Woman's Hospital of Chicago; Gynecologist to Charity and Post-Graduate Hospital; Member of the Chicago Gynecological Society and the American Gynecological Society, etc. Chicago: The W. T. Keener Co, 96 Washington Street. 1893. \$2.00.

The first edition of this work appeared in July, 1892; the second edition in April, 1893. The second edition appearing in such a short time is sufficient proof that the work is gladly received and highly appreciated. This work has been written as a text book for students and practitioners of medicine. At least one-third of the book is occupied with presenting the primaries of electricity, of analyzing these primaries into laws, of developing these known laws into principles which may be depended upon to accomplish results. Another third of the book is occupied with illustrations and apparatus. Many beautiful illustrations are shown here and all kinds of batteries and appliances are fully described, and the manner in which to use them clearly explained. The remaining third of the work deals in the application of the principles laid down in the earlier portions, to the practical treatment of diseased conditions. 'Tis here the author gives the profession his results of treatment in every detail. 'Tis remarkable the great advancement made in this line, and the author should reap rich fruits from his untiring labors in presenting this book to the profession. The methods of procedure in the treatment of every condition is dwelt upon at length. It is a very handsome work, and as for the manner and style in which it is gotten up, it cannot be excelled. We

can say to our readers that it is one of the newest subjects treated and a most valuable book.

DUNGLISON'S NEW PRONOUNCING MEDICAL DICTIONARY.

A new edition of Dunglison's Medical Dictionary is announced as in press for early publication. It has been thoroughly revised and greatly enlarged, and will contain about forty-four thousand new medical words and phrases. Pronunciation has been introduced into the new edition by means of a simple phonetic spelling. This work has always been noted for the fulness of its definitions, ample explanation being its distinguishing characteristic. In the new edition much encyclopædic information, difficult of access elsewhere, will be found conveniently at hand. Especial attention has been devoted to matters of practical value. A review will appear in an early issue.

THE BOOK OF THE FAIR, by HUBERT H. BANCROFT.

This book is being prepared by the Bancroft Company of Chicago and will soon be ready for sale. It will fittingly portray the great Columbian Exhibition, and will be among the most interesting and attractive books for present use and future preservation that has been published. It will contain 1,000 imperial folio pages, 12x16, printed on the finest enameled paper. Price reasonable.

SHARP & DOHME'S PRICE LIST FOR THE PRESENT YEAR.

Through the kindness of the house we recently received their Price List. Judging from the manner and style in which this pamphlet is gotten up it shows that this firm is one of the leading and most enterprising firms of the day. It is neatly and carefully gotten up and is complete.

Read It Carefully.

The advertising department of a medical journal is one of great importance to you, doctor. Scan it carefully that you may keep well posted as to the advances made in therapeutics, by our enterprising native chemists.

Vin Mariana.

This is a preparation of world wide reputation, adapted to low forms of disease resulting in nervous prostration. If you try it once you will never be without it. See advertisement.

Selections.

Case of Collapse Caused by Antipyrene.

BY DR. L. A. TURNBULLS.

Was called to see Mr. D——, a carpenter, aged fifty-two years. Patient said that he had always enjoyed very good health, but that during the last year he had been more or less subject to muscular pains, and pains about the joints in damp weather; these, however, had never been severe enough to cause him to stop work. Two days before calling me he had been caught in the rain while going to work, and had allowed his wet clothes to dry on his body. Upon arriving at home that evening he had had a chilly feeling, afterwards a fever and pain in the right knee joint. At the time of my visit the patient was suffering from an attack of acute articular rheumatism. The temperature was 102 and joints very painful. I put him on the usual treatment for such cases, and with an idea that antipyrene would reduce the temperature and besides relieve the pain to some extent, until the disease was gotten under control, I ordered ten grains of antipyrene every four hours. I was hastily summoned during the night and found the patient pale, sweating profusely and somewhat drowsy. His wife stated that she had given two of the antipyrene capsules (four hours apart) and that her husband had become unconscious after each capsule, and sweated profusely. I of course discontinued the antipyrene. At my morning visit the fever was again 102, and I ordered Antipuralgos, ten grains every four hours; this had no deleterious action and controlled the fever nicely. A careful examination of the heart failed to reveal any lesion in this case. About two years ago I treated a prostitute, in the course of whose malady an antipyretic was needed, she also collapsed twice after taking ten grains of antipyrene, although other antipyretics did not cause any bad symptoms.

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The Old Country Doctor.

The following pen picture is taken from The Christian Herald, the journal edited by the Rev. Dr. Talmage. It is not signed with his name, but it bears an exceedingly close resemblance to his writing. Especially worthy of the eloquent divine is his peroration, where he says of the overworked old country doctor: "He deserves every kindness at our hands."

"Our country physicians," says he, "have so many hardships, so many interruptions, so many annoyances, I am glad they have so many encouragements. All doors open to them. They are welcome to mansion and to cot. Little children shout when they see them coming down the road, and the aged, recognizing the step, look up and say, 'Doctor, is that you?' They stand between our families and the grave, fighting back the troops of disorder that come up from their encampment by the cold river. No one hears such thanks as the doctor hears. They are eyes to the blind, they are feet to the lame, their path is strewn with the benedictions of those whom they have befriended. One day there was a dreadful foreboding in our house. All hope was gone. The doctor came four times that day. The children put away their toys and all walked on tiptoe, and at the least sound said 'Hush!' How loudly the clock did tick, and how the banister creaked, though we tried to keep it so still! That night the doctor stayed all night. He concentrated all his skill upon the sufferer. At last the restlessness of the sufferer subsided in a calm, sweet slumber, and the doctor looked up and smiled, and said: 'The crisis is passed.' When propped up with pillows, in the easy chair, she sat, and the south wind tried to blow a rose-leaf into the faded cheek, and the children brought flowers—the one a red clover top, the other a violet from the lawn—to the lap of the convalescent, and Bertha stood on a high chair with a brush smoothing her mother's hair, and we were told in a day or two she would ride out, joy came back to our house.

"And as we helped the old country doctor into his gig, we noticed not that the step was broken, or the horse stiff in the knees, and we all realized for the first time in our lives what doctors were worth. Encourage them; they deserve every kindness at our hands.—*N. Y. Medical Journal.*

Diphtheria.

Dr. Stewart, in Lancet-Clinic, says : Diphtheria is an insidious disease. The child may run about and give no symptoms, except, perhaps, complain of difficulty in swallowing, and that is one thing which so often causes us to be unable to do anything, for the toxic principles have been set free and the throat is involved generally. Scarlet fever and follicular tonsilitis both begin suddenly. The child will vomit, the temperature run up to 103° or 104° F., the throat become red. If we see no membrane, we are apt to think of scarlet fever, and if we wait twenty-four hours the eruption will be out. It does not take long for the eruption to appear in scarlet fever. In the onset of the disease there is a very wide difference between diphtheria and tonsilitis or scarlet fever.

I saw one case in which there was a tonsilitis with patches and no attempt at confluence. These disappeared in twenty-four hours, as is usual, but when they disappeared the true diphtheretic membrane appeared on the fauces and the child died of diphtheria.

Another point of very great importance to me is that almost as soon as you can find a patch on the fauces or tonsils of a child with diphtheria, you will find the cervical glands enlarged. These glands are soft and give you the impression at once of being freshly invaded. A child with a low degree of temperature and only patches on the fauces with enlarged post-cervical glands should be regarded as in a very suspicious condition, and I would treat the child for diphtheria. On the other hand, if the child becomes suddenly sick, with red fauces and fever, I would look for scarlet fever. Again, if patches appeared suddenly, I would expect tonsilitis, and in seventy-two hours the patient would probably be all right.

Alcohol in Age.

With advancing knowledge, there is no longer any justification for the supposition that alcohol fosters vital heat or imparts vital force ; for science has demonstrated that the sensations which seem to indicate this in either case are opposed to the fact ; that alcohol lowers the temperature, lessens the powers of resistance, and at the bottom is not a stimulant at all, but rather a paralyzant.

Horseford's Acid Phosphate is a refreshing summer beverage.

Katharmon.

This well known preparation is now one of the most deservedly popular antiseptics in general use. It is adapted to a wide range of pathological conditions, especially inflammations of mucous membranes. For further information call on Katharmon Chemical Company, or see ad in Journal.

"The Medical Press."

In a recent exchange we find an article under the above caption, written by Dr. George M. Gould, of Philadelphia. It seems that the paper is the substance of a response to a toast at the dinner given by the President of the American Gynæcological Society to its members in Philadelphia, May 16th, 1893. The remarks made on this occasion, and subsequently published as a journal article, and coming as they do from a medical editor, are very peculiar and well worthy of further comment. The paper demonstrates how easily one may argue very reasonably on one side of a question and at the same time how foolishly the same individual may discuss the other side. Dr. Gould would have us believe that all of the medical editors of this country, with the exception of himself and a friend or two in Detroit and Pittsburg, are frauds and parasites, and that the extermination of our journals would be a great blessing to himself especially and to the profession generally. We may all be wrong and Dr. Gould may be the embodiment of moral rectitude and superlative wisdom, but we doubt it extremely. In this case "*vox populi* may not be *vox Dei*," but it generally gets there all the same, and men who spend their lives and energies in trying to correct evils that are only apparent to one in a million, should occasionally pause and examine their own charts. Sometimes a man gets a little off before he knows it, and he might profit by watching the crowd a little. We believe that excellent old man, Mr. Lincoln, once said something like this:

"You may fool all of the people some of the time, and some of the people all of the time, but you cannot fool all of the people all of the time."

We do not believe that nine-tenths of the medical journalists of America are such men as Dr. Gould has painted, nor do we believe that they can be "bought, bribed, bullied or wheedled into doing

whatever the patent-medicine manufacturer may demand. On the contrary, we have considerable faith in the integrity, honor and good sense of the average medical editor. We also have much confidence in the honesty of many manufacturers who would doubtless be classified by Dr. Gould as "patent-medicine men," when in reality they simply choose to consult their own judgment in the conduct of their affairs rather than that of Dr. Gould and men like him.

We are sorry to see such disrespectful language used by an editor concerning his brother editors everywhere. The following are some of the expressions with which the entire article abounds:

"A sorry aspect of so much of this 'journalism' is the practice of plagiarism, uncredited excerpts and conscienceless stealing."—*Gould's Toast.*

Plaster of Paris.

The method of testing the quality of plaster of Paris is by taking a small pinch of the powder between the thumb and finger and gently rubbing it; if small particles of grit are felt, it indicates that parts of the plaster have already absorbed water, and it is therefore unfit for use. The same test may be observed by taking a pinch of the powder again and placing the fingers under water, and then rubbing in the same way as before. If, however, in both of these tests no grit is felt, and under water a thin, creamy substance is formed, which is easily rubbed off the fingers, the plaster is in a proper condition for use. Where plaster has been kept for a long time, or where it is gritty, its condition can be very greatly improved. It may be re-dried by putting it in a metal dish, such as a pie plate or iron pot, and placing it in an oven of a hot fire or over a gas jet. As soon as it becomes heated it will be observed that a process identical with boiling water is taking place. When this ebullition has entirely ceased, the powder is freshly kiln-dried. If the method of testing is again resorted to, it will be found that the gritty appearance and feeling will have disappeared, in a very large measure, leaving only the fine dry powder ready for use. If there are any lumps remaining, they may be removed by the use of a sieve. From what has been already said, it will need be but a reminder that the plaster of Paris must always be kept in a hermetically sealed jar, or in a very dry place.

Medication in Vaginal Diseases by Capsuled Tampons.

Permit me to call the attention of the profession to one of the most useful, ingenious and complete modes of treating many diseases of the womb that it has been my good fortune to try. I allude to Dr. Anderson's Antiseptic Vaginal Capsules, with absorbent filling, manufactured by the Hall Capsule Co., of Cincinnati, O. By the use of this capsule the physician is saved the nauseating performance of introducing caustics or other applications of cotton, forceps, sound, etc. All that is necessary is to introduce your medicament on absorbent cotton in the capsule, close it and then introduce it, and the work of application is done. By means of a string there is no trouble in removing the cotton. Owing to the softness and easy pressure, the patient feels no inconvenience whatever. As a pessary, I regard it the best I have ever seen. The first case in which I had occasion to use the capsule was with a lady 36 years of age, with extensive ulceration of the os uteri. She informed me that she had been under treatment of various physicians for three years, but could not see that she had improved. In addition to the ulceration was anteversion, discharge free and very offensive, so much so that she dreaded society. The terrible strain upon her was wrecking her system. About the middle of last November I commenced treating her by means of Dr. Anderson's Antiseptic Vaginal Capsules. For the first ten days the discharge was so great that the capsule was changed twice in twenty-four hours. As she improved, it lessened rapidly and a change once in twenty-four hours was sufficient. But by the first of January she had gained eight pounds. At the present writing no ulcers have appeared. The benefits derived from its use as a pessary, certainly command the intelligence of physicians. I have also used the capsule in several cases of leucorrhœa with better success than any other mode I have tried. While I am not quick to run after strange gods, yet I candidly believe the physician who will give this capsule an impartial trial, will agree with me that it is the easiest and best means of treatment known, as the medicine prescribed comes in contact, at once, with the diseased parts and is retained there until it is absorbed.—*John R. Brown, M. D., in Columbus Medical Journal.*

The standard tonic is Fellow's Comp. Syr. of the Hypophosphites.

Strontium Bromide in Epilepsy.

The constantly increasing number of incurable epileptics, both in asylums and at large, occasions an ever-growing demand for new drugs, from which we may at least hope to effect some improvement, in either their physical condition, or a diminution of the number of seizures.

Among the recent applicants for medical favor in this line has been the bromide of strontium (Paraf-Javal), purporting to be a salt free from the impurities of the ordinary commercial article, which render it unfit for continued use, or even poisonous in moderate doses. This statement as to its non-toxic action we have found to be well founded, no evil result having followed 30-grain doses repeated thrice daily, and no case that has been treated with the salt has shown other than beneficial results. Above all, we have to note continued absence of a bromide acne (even the disappearance of the rash, though it was present when the use of the strontium was commenced), a very much lessened somnolent effect, the patients without exception appearing brighter and more cheerful under its use than with the sodium salt, and finally certain excitable cases were less quarrelsome after a seizure than under the every-day treatment; points all of very considerable value, both in private and asylum practice.—*Times and Register, July, 1893.*

Served Him Right.

A man stepped into a grocer's shop to make a few purchases. While the clerk was weighing the goods the customer could not resist the temptation of treating himself to a piece of sugar which was lying on the counter. The clerk observed the action, and soon afterward, with startled mien, called aloud into the shop: "What has become of that lump of arsenic that was lying here?" The poor fellow felt hot and cold, and in his terror confessed the deed. "You are a dead man!" said the pert clerk; "but I have here an antidote. Quick! take as much of it as you can swallow." And he filled a tumbler full of salt and water. The poor fellow eagerly drank off the abominable stuff to save his life if possible. He then rushed out in order to secure a second antidote from a neighboring pump. He has never been known to pilfer sugar since that day.—*London Grocers' Chronicle.*

Physicians who have been disappointed in the use of favorite Prescriptions have
the remedy in their own hands. Prescriptions and orders should read
"Wm. S. M. Chem Co."

GREEN : DRUG FLUID EXTRACTS

CHARACTERISTICS:

UNIFORM STRENGTH, CONVENIENCE
OF ADMINISTRATION, NON-LIABILITY TO
DETERIORATION BY AGE, POSITIVE THE-
RAPEUTIC EFFICACY.

The WM. S. MERRELL CHEMICAL CO. will not hold themselves responsible
for the identity of Fluid Extracts, filled out by druggists from bulk stock, even though
the written label may read "Merrell's." **CAUTION.**—Accept original packages only.

☞ Read our Monograph—"Green Drug Fluid Extracts: Their Origin, History
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SALICYLIC ACID
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are slow but certain poisons.
produce symptoms closely resembling delirium tremens.
patients become delirious.
dangerous to human life.
have to be watched and not to be trusted.
retard convalescence.
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been dialyzed or purified.

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FLUID HYDRASTIS.

A solution of definite strength and reliability, representing all the valuable constituents of the drug—the
offensive and irritating resins being rejected. The only perfect representative of the drug in the fluid
form—within reach of the medical profession. Though often attempted it has never been successfully
imitated. Send for our pamphlet on "Hydrastis and its Preparations."

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Anderson Antiseptic Vaginal Capsules

FOR THE LOCAL TREATMENT OF

DISEASES OF THE VAGINA AND UTERUS.

The most efficient and cleanly means of introducing remedies into the vagina. Antiseptic, perfectly soluble and reliable. Each capsule contains an absorbent tampon which may be medicated with any remedy indicated.

WHEN?

In all cases of acute and chronic inflammation of the lining of the womb, gonorrhoeal syphilitic, purulent and leucorrhoeal discharges.
Relaxation of the uterine ligaments and weakening of the vaginal walls.
Falling of the womb. Ulceration of the os uteri.
Disease of the ovaries and fallopian tubes.
Painful and scanty menstruation.
Where the womb is extremely irritable and neuralgic.

HOW?

Moisten the tampon with the remedy, draw it back into the capsule by means of the linen thread, replace cap and insert.

WHAT?

The result is a grateful relief to the sufferer and satisfaction to the physician. No handling of disagreeable drugs; no loss of medication in the introduction, no soiling of linen.

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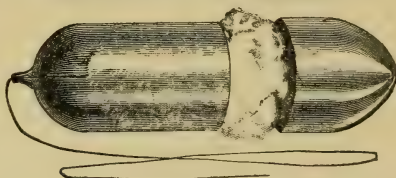
EFFICIENT.

Three sizes

No. 1 Small

No. 2 Medium

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Tampon.

Absorbent Cotton,
Oulo-Kutun (Wool
and Cotton) or Wool,
as desired.

Exact size of No. 2 Capsule.

Any size by mail postpaid on receipt of price, 60c. per box.

VALUABLE AS A PESSARY.

Extract from a letter from Dr. A. J. Howe, Professor of Surgery, Eclectic Medical Institute, of Cincinnati, O.

"The Anderson's Vaginal Capsules charged with tampons of Oulo-Kutun are a convenient vehicle and medium for introducing douches or medicated fluids into the vagina, and retains them there. Astringent, sedative and antiseptic liquids may be thus employed, instead of the syringe as an implement, or a speculum."

Respectfully,

A. J. HOWE, M. D.

Send for printed matter containing valuable information.

THE HALL CAPSULE CO.

Manufacturing Chemists.

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Have you seen our "Ruby Capsule" for disguising the physical appearance of prescriptions, and for use when two medicines are to be taken in alternation? Send 10c. for trial box of 100.

Infantile Uterus.

No therapeutic measure to-day offers so sure and complete results in mal-development of uterus and appendages as electricity, scientifically and timely applied. Faradization may be depended upon to perfect development of the muscular tissue, and for its stimulating effect on the involuntary fibres of the walls of the blood vessels.

The galvanic current, if properly applied, produces a determination of blood to the parts, thereby affording pabulum for development of tissue and improving the nutrition.

Faradization may also be so altered as to produce a sedative effect on the nervous and muscular tissues. Hence we have in this element—electricity—all the requisites for development, and means by which physiological conditions are almost identically produced and relieved.

It accomplishes what rest, diet, massage and drugs can not. Its benefits are permanent and may be confidently relied upon to produce unfailing results. It is easy of application, giving little or no pain, and without danger. Its future in gynecology, I am satisfied, is great from the standpoint as a potent means of developing feeble organs. Its best results are to be obtained in youthful subjects whose tissues are in a plastic state, and especially not in those in whom a mal development has existed sufficiently long to produce atrophy.

This treatment to be successful must be frequently applied and extend over a period of months. No one can question the correctness of the position taken in this article as to uterine development who has ever seriously considered the injurious effects of modern forms of female dress, and the mental work required, and the limited amount of exercise taken.—*Jour. A. M. Ass'n.*

Dr. W. C. Abaly says : I have used Three Chlorides, R. & H., with marked success in syphilitic iritis, teritary syphilis with anæmia. As a tonic alterative and for various conditions in which mercury, iron; and arsenic are indicated in a palatable form, I take great pleasure in recommending it to brother practitioners.

September 12, 1891. Madison, Wis.

For Elastic Bandages, Supporters and Trusses, send to the Empire M'fg Co., Lockport, N. Y.

Dosage.

Chloride of sodium, or common table salt, in ten to twenty grain doses, is a tonic and alterative ; in doses of from one to two drachms an astringent and anthelmintic ; and one to two ounces of it in six ounces of water makes it an emetic.

Sulphate of sodium in a large dose is a purge, and in very small and frequently repeated doses it is a diuretic.

Digitalis in a large dose is an emeto-cathartic, and in minute doses given at short intervals it is a diuretic.

The well known arsenical solution of Fowler, in one-half to one drop doses every half hour, during three or four consecutive hours, will relieve the vomiting following a debauch ; and it is also of great usefulness, in such small amounts, in the uncontrollable vomiting of pregnancy.

No physician doubts the efficacy of the fluid extract of ergot in excessive menstruation ; but what surely is just as true, although it may appear contradictory, is the great improvement obtained in cases of amenorrhea not dependent on anemia, with drop doses of the same preparation every two or three hours at the time of the menses.

It can not be denied that ammonia, alcohol, and ether, given in moderate amount, excite cardiac action, and in large quantity they arrest the heart in diastole.

Very minute quantities of atropia render the pulse slow, and large quantities make it exceedingly rapid.

Moderate doses of digitalis slow the pulse, while large ones quicken it.

The Belle of Nelson brand of whisky is a "licker" that gently tones the system with no bad after effects. Bartley, Johnson & Co., of Louisville, Kentucky, the owners of this brand, let none of this case goods go out of their warerooms until it reaches an age of some eighteen years. Dr. David Yandell recommends it as a most pure whisky, particularly adapted for medicinal purposes.

Salt Natrolithic.

The Natrolithic Salt of the Health Restorative Co. is said to be the most pleasant in action of any of the saline purgatives.

Treatment of Uterine Troubles.

More and more, as time passes and the smoke of discussion gives way to solid conviction, is the profession impressed with the thought that there are many diseases of women and girls, which, under no circumstances, require or should receive manipulative or mechanical treatment. Indeed, conscientious physicians, recognizing the neurotic factor, and granting to the uterus and its appendages the privilege of being locally disturbed by constitutional conditions, are ready to receive gratefully and enthusiastically such a remedy as Ponca Compound. It serves as a general stimulator of secretions, and as a thorough tonic. The endorsement of such men as Dr. A. M. Owen, of Evansville, Ind.; Dr. Thos. Hunt Stucky, of Louisville; Dr. Arch Dixon, President of the Kentucky State Medical Society; Dr. Wm. F. Kier, of St. Louis, and hundreds of others scattered over the country, is convincing proof of the value of Ponca Compound.—*Medical Mirror*.

Trional, under quite recent clinical tests, is found to have special value in uncomplicated agrypnia or wakefulness with a certain amount of excitement. In these cases it is said to have acted promptly and effectively in doses of 1 to 2 grammes. Trional is useful also in convalescence from the abuse of cocaine and morphine. Some of the reports state that doses of 2 grammes would usually procure for these patients a sleep of from 7 to 9 hours duration. According to a recent report by Boettiger, dementia with hallucinations was very favorably influenced by Trional. The same writer reports 33 cases of insomnia, with physical disturbances in the insane. These were primary or secondary, or were accompanied by moderate delirium or motor restlessness. Doses of 1 to 2 grammes of Trional promptly induced a sleep of 6 to 10 hours. The full report of the cases referred to was published in the *Berl. klin. Woch.*, No. 42, 1892.

“When I was young we prepared students for life; now we prepare them for examinations,” is a bit of truth from Jules Simon.—*Exchange*.

W. D. Allison Co., Indianapolis, Ind., manufacture a magnificent office table.

The Use of Cocaine.

1. Amount of cocaine used must be in proportion to extent of surface it is desired to anæsthetize. In no case should the quantity exceed one grain and three-quarters.

2. Cocaine should never be used in cases of heart disease, pulmonary disease, or in persons of highly nervous temperament.

3. In injecting cocaine, the intradermic method is preferable to hypodermic. By injecting into, not under mucous membrane or skin, the risk of entering a blood vessel is avoided.

4. During injection the patient should always be in a recumbent position; in operations upon the nose and throat, the head should not be raised until anæsthesia is complete.

5. It is of great importance that cocaine should be pure, since its combinations with certain other alkalies result in poisonous compounds.—*Brooklyn Medical Journal*.

Would Not Kill.

An English scientist advises that people caught in a thunder-storm should permit themselves to become thoroughly drenched with rain. Then it would be impossible for lightning to kill them. The wet clothing would offer such ready conduction to the electric fluid that the body beneath would be safe.

Turpentine in typhoid fever is coming more and more in favor with the newer generation. though with many older practitioners it has been the drug upon which the greatest reliance has been placed. Wood regards it as invaluable where, in convalescence, symptoms point to slowness in healing of the ulcers, or where, in the second week, there is decided tympanites.—*Medical Record*, Feb. 4, 1893.

Tissue Phosphates (Wheeler) is a combination in a most acceptable and agreeable form of phosphate of calcium, sodium phosphate, ferrous phosphate, trihydrogen phosphate, and the active principles of calisaya and wild cherry. It is highly recommended where a tonic containing these ingredients is indicated.

The Forbes Diastase Co., Cincinnati, O., are manufacturing a fine digestive agent.

THE BEST ANTISEPTIC
FOR BOTH INTERNAL AND EXTERNAL USE.

LISTERINE.

Non-Toxic, Non-Irritant, Non-Escharotic—Absolutely Safe, Agreeable and Convenient.

FORMULA.—LISTERINE is the essential antiseptic constituent of Thyme, Eucalyptus, Baptisia, Gaultheria and Mentha Arvensis, in combination. Each fluid drachm also contains two grains of refined and purified Benzo-boracic Acid.

DOSE.—Internally: One tea-spoonful three or more times a day (as indicated), either full strength, or diluted, as necessary for varied conditions.

LISTERINE is a well-proven antiseptic agent—an antizymotic—especially useful in the management of catarrhal conditions of the mucous membrane, adapted to internal use and to make and maintain surgical cleanliness—asepsis—in the treatment of all parts of the human body, whether by spray, injection, irrigation, atomization, inhalation, or simple local application, and therefore characterized by its particular adaptability to the field of

PREVENTIVE MEDICINE—INDIVIDUAL PROPHYLAXIS.

LISTERINE destroys promptly all odors emanating from diseased gums and teeth, and will be found of great value when taken internally, in teaspoonful doses, to control the fermentative eructations of dyspepsia, and to disinfect the mouth, throat and stomach. It is a perfect tooth and mouth wash,
INDISPENSABLE FOR THE DENTAL TOILET.

DISEASES OF THE URIC ACID DIATHESIS.

LAMBERT'S LITHIATED HYDRANGEA.

RENAL ALTERNATIVE—ANTI-LITHIC.

FORMULA.—Each fluid drachm of "LITHIATED HYDRANGEA" represents thirty grains FRESH HYDRANGEA and three grains of CHEMICALLY PURE Benzo-Salicylate of Lithia.

Prepared by our improved process of osmosis, it is INVARIABLY OF DEFINITE and UNIFORM therapeutic strength, and hence can be depended upon in clinical practice.

DOSE.—One or two teaspoonfuls four times a day (preferably between meals.)

Close clinical observation has caused Lambert's Lithiated Hydrangea to be regarded by physicians generally as a very valuable Kidney Alternative and Anti-lithic agent in the treatment of

Urinary Calculus, Gout, Rheumatism, Cystitis, Diabetes, Hæmaturia, Bright's Disease, Albuminuria, and Vesical Irritations Generally.

REALIZING that in many of the diseases in which LAMBERT'S LITHIATED HYDRANGEA has been found to possess great therapeutic value, it is of the highest importance that suitable diet be employed, we have had prepared for the convenience of physicians

DIETETIC NOTES,

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MEDICAL DEPARTMENT.

FIFTY-THIRD YEAR, 1893-94.

Special * Announcement.

The Session of 1893-94 will Begin Wednesday, October 4th, 1893.

Attention is called to the fact that the curriculum has recently been entirely remodeled and greatly improved. It now consists of a three years' graded course, divided as follows:

- 1ST YEAR.**—Lectures and recitations from text-books on Anatomy, Physiology and Chemistry. Dissection and Laboratory work in Histology, Materia Medica and Chemistry.
- 2D YEAR.**—Lectures on Surgical and Regional Anatomy, Experimental Physiology, Experimental Chemistry, Physics and Hygiene, and Materia Medica. Recitations from text-books on Pathological Anatomy, Practice of Medicine, Surgery, Materia Medica, Obstetrics and Demonstrations on the Manikin. Laboratory work in Pathology; Clinics in Bellevue Hospital and the College Building on Medicine, Surgery and Gynecology.
- 3D YEAR.**—Lectures on Practice of Medicine, Surgery, Obstetrics, Gynecology, Therapeutics and Pathology, with Autopsies. Bedside teaching in small classes in the Wards of Bellevue Hospital on Medicine, Surgery and Gynecology. Clinics in Bellevue Hospital and the College Building on Medicine, Surgery and Gynecology.

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The Secret of Long Life—An Investigation into the Habits of Certain English Centenarians.

Sir George Humphry has investigated the life histories of centenarians in England, with the view of ascertaining the causes and circumstances of longevity. The report was published by the Collective Investigation Committee of the British Medical Association in 1887. As one reads of the habits and life of these men and women, who attained to the age of one hundred years and more, one is struck by the fact that they were almost invariably lean people, of spare habit, and of great moderation in eating and drinking. Of thirty-seven three took no animal food, four took very little, twenty a little, ten a moderate amount, and only one acknowledged taking much meat.

With regard to alcohol, the returns are much the same, and abstemiousness is found to be the rule of life of these centenarians. Fifteen had been total abstainers, either during the whole or part of their lives; two took very little alcohol; twenty-two a little; and ten a moderate amount. Sir George Humphry's interesting and valuable collection of facts regarding centenarians confirms opinions which have been held from time to time by various persons, in opposition to the generally accepted view, that as age increases and strength diminishes food should be more stimulating and strengthening.

The most remarkable of these persons was Cornaro, an Italian nobleman, who lived in the fifteenth and sixteenth centuries, and who attained the age of upward of one hundred years. He seems in middle life to have suffered from dyspepsia, brought on by over-indulgence, for he says that he had "fallen into different kinds of disorders, such as pains in my stomach, and often stitches, and species of the gout, attended by what was almost still worse, an almost continual slow fever, a stomach generally out of order, and a perpetual thirst." At the age of forty he decided that abstemiousness and regularity should be the order of his life, instead of the previous course of indulgence in eating and drinking, which was surely driving him to his grave. He kept his resolution for a year, at the end of which time he declared himself free of all his complaints. He states that his rule was to take as much food and wine as would check appetite without completely satisfying it.

"I accustomed myself," he says, "to contrive matters so as to never cloy my stomach with eating and drinking; but constantly to rise from the table with a disposition to eat and drink still more. * * * What with bread, meat, the yolk of an egg, and soup, I ate as much as weighed in all twelve ounces, neither more nor less. I drank, in all, fourteen ounces of wine." Cornaro lived on this meagre diet to a vigorous old age. He wrote several treatises on the subject of diet, urging others to follow his example; one of these was written when he had attained the age of ninety-five, and shows that he was in full possession of his faculties.—*Evening Telegraph*, June 28, 1893.

Spontaneous Rupture of the Symphysis Pubis During Labor.

Oelsclager (Centralbl. f. Gynakol.) has reported the case of a primipara, twenty years old, in which with the onset of labor-pains two eclamptic attacks occurred in quick succession. The lower extremities were edematous, and the urine contained a small amount of albumin. The promontory of the sacrum could be touched with two fingers introduced into the vagina. The head was quite high in the pelvis and but slowly followed in the grasp of the forceps, a not excessive degree of traction being exercised. As the head began to rotate in the small pelvis a crack was distinctly heard. Examination disclosed a separation of 1.15 inches in the situation of the symphysis pubis, and the delivery of a living child weighing nine pounds was soon readily effected. On the day following the labor a leather support was applied to the hips. For two weeks the region of the symphysis was tender upon touch and painful upon movement, but a week later the woman was able to be up and about, although a slight degree of separation of the pubic bones persisted.

We desire to direct our readers' attention to the card of the Walker-Green Pharmaceutical Co., of Glasgow, Scotland, who have established themselves at Kansas City, Mo., where the business on this continent is conducted. They make a few most elegant pharmaceutical preparations. Amongst the number, we can speak words of commendation of their Elixir Six Iodides. We know of no medicine that is more certain and positive in its action than this combination, if prescribed in cases where it is indicated.

Abstracts.

Notes.

Few physicians, who have practiced medicine five years, but have assured some patient relief, in the use of cod liver oil, only to see the patient sink lower and lower, from want of power to digest the remedy. Cod Liver Glycerine removes this difficulty; capable of being diluted with water, requires no digestion, but is a digestive stimulant. If you give Cod Liver Glycerine it will be assimilated. It combines readily in all prescriptions.

The Superintendent and Surgeon in charge of St. Louis City Hospital. Dr. A. Marks, announces that Cod Liver Glycerine is now used in that institution. Its power to mix uniformly in any proportion, in all prescriptions, or to mix with water and spirits without separating on standing, renders it the most desirable reconstructive in the convalescent period of difficult surgical cases, or acute diseases attended with emaciation; while its digestive properties insure its therapeutic action. †

The Relation of Age, Sex and Social Condition to the Mortality from Tuberculous Disease.

In an analysis of 1771 fatal cases of tuberculous disease in the Swedish-Finnish community of Helsingfors during the years from 1882 to 1889, Holsti (*Zeitschrift f. Klinische Medicin*) found that the mortality from this cause was incomparably greatest during the first two years of life, but declined thereafter, to reach its minimum between the years of five and fifteen; rising again to reach its maximum between the years of thirty-one and forty, after which it again gradually declined. In general, the mortality from tuberculosis was greater among males than among females, except between the fifth and the twentieth year, during which period the greater number of deaths from tuberculosis occurred among females. After the maximum mortality had been reached, between the thirty-first and the fortieth year, the mortality among females gradually grew less; in males, however, the mortality continued at almost an unchanged level until the age of sixty.

Koch, the bacteriologist, is to marry a young actress, his wife having obtained a divorce with the award of one-fourth his income.

Proposed Organization of Medical Journal Publishers.

It gives us pleasure to be informed that there is to be organized a Medical Publishers' Association in Washington during the meeting of the Pan-American Medical Congress, which convenes September 5. Such a organization, if properly formed, will not only be a protection and benefit to the publishers of medical journals, but to the advertisers as well. Whilst the publishers of many of the medical journals are also editors and properly belong to the Association of editors which meets simultaneously with the American Medical Association, they certainly must recognize that there are matters pertaining to the business and financial interests of the journals that do not come within the purview of the Editors' Association. We understand the object of the Publishers' Association shall be for the better protection of legitimate advertisers and the publishers, and is not in any way to take the place of or interfere with the work of the Editors' Association. Such being the case the organization of the Publishers' Association should meet with their hearty co-operation, and we trust that editors will take note of this proposed movement. Should they themselves not be publishers of the journal they edit, we hope they will advise their publishers of the meeting to be held in Washington September 5, urging them to be present, and give their co-operation to such an organization as shall be for their mutual protection.

Uterine Tonic in Pill Form.

Dr. J. H. DeWolf, of Baltimore, Md., in an article in The Medical Summary, August, '93, says: "One of the most important therapeutic agents is Dr. Buckley's Uterine Tonic, in pill form. It is a money-maker for the doctor, and the great beauty is that the patient must come to you to obtain it, not knowing what she is taking. Dr. W. C. Abbott, of Ravenswood, Chicago, Ills., will tell you all about it. If you want to make what you are entitled to, keep your own drugs and thus compel your patients to pay their bills promptly, thereby protecting your interest and those near and dear to you."

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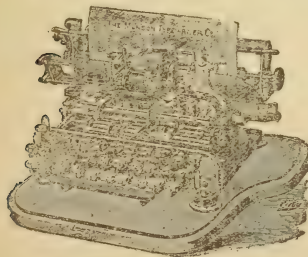
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Drs. J. STAHL, BERLIOZ and FRILLAT, found that Anthrax Bacilli were killed by a solution of 1:50,000, while Aaronson stated that solutions of 1:20,000 prevented the development of Typhus and Anthrax Bacilli, as well as that of Staphylococcus Pyogenes Aureus.

Dr. J. STAHL's observations showed that after one hour's exposure to a one per mille, or a quarter of an hour's exposure to a 1½ per mille solution of FORMALIN, the most resistant forms of micro-organisms were destroyed. FORMALIN, therefore, is equal at least in germicidal power to Corrosive Sublimate, and, under certain conditions, superior when Albuminoid Solutions are present.

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Practical experiments have shown that neither gastric disturbances, alterations of blood-pressure, nor cyanosis follow the administration of Salocoll. It has shown itself a reliable and safe anti-pyretic, anti-neuralgic and anti-rheumatic, having beneficial effects in many cases, where other remedies proved of no use. In influenza its beneficial effects were especially marked. The dose for adults is 15 to 30 grains in powder, several times a day; in appropriate sub-
divisions of this quantity it can also be given to children with safety.

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KRESIN.—A powerful antiseptic and disinfectant, completely and clearly soluble in water, for medical, surgical and hygienic use. An excellent deodorant and germicide in very dilute proportions. It destroys all contagious germs and foul odors and is therefore excellently adapted for the disinfection of excrementitious matter, water-closets, vaults, zincs, wastepipes, etc. It also destroys mould, fungi, and dry-rot in houses.

Endorsed by prominent physicians and extensively used in the Berlin Hospitals.

According to experiments made at Dr. E. RITSERT's pharmaceutical, bacteriological and chemical institute, at Berlin, the antiseptic and disinfectant action of KRESIN, is far superior to that of Creolin and Lysol. KRESIN is supplied in one pound bottles and ten pound cans.

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PAMPHLETS FURNISHED ON APPLICATION.

Remedy for Obesity.

Dr. A. Sanford, Everett, Mass., says : "For several years I have been on the lookout for some preparation which would reduce flesh without injuring the general health, but have never succeeded in finding one. Several weeks ago, however, I received a pamphlet on the action of Phytoline (the active principle of the berries of *phytolacca decandra*) in obesity, and about that time a patient applied to me for a reduction in her weight. I prescribed Phytoline, and directed her to take ten drops before and after the three daily meals. She has now taken about two weeks' treatment, and tells me to-day that she has lost fifteen pounds, and that too without making any change in her diet or affecting her general health. I am pleased with the results and can conscientiously recommend it."

A practitioner devoting especial attention to the diseases of children says : In the treatment of choleraic diarrhœa we are safe, it matters not at what time we may be called, in administering some antiseptic medication, something which will prevent fermentation, and have a destructive effect upon the septic germs more than likely present in the alimentary canal. Happy effects are often secured by the use of Listerine properly diluted ; a favorite prescription is the following : R Lambert's Listerine, glycerin (c.p.), syr. simp., aquæ cinnamon, aa ʒj. M. Sig. Teaspoonful every one, two or three hours, as may be indicated. Taking into consideration the component parts of Listerine, it impresses me favorably as a prophylactic and remedial agent for cholera, along with other intestinal disturbances. The eucalyptus, thyme, gaultheria and boracic acid which it contains are all antagonistic to germ life and oppose fermentation. The preliminary diarrhœa (cholerine, as it is called) may well receive teaspoonful doses of Listerine combined with the same amount of glycerine ; in fact I should be inclined to recommend to the laity this combination as a prophylactic measure.

Prof. Hare says the Iodide of potassium will be found to the best adapted, not to the acute stages of rheumatism, in which in the joints are generally very hot and painful, but to the sub-acute stages, in which the joints are swollen and the return to the normal condition seems to be very slow.

Bacilli in Butter.

Oleomargarine has the advantage of butter in the matter of freedom from bacteria, averaging only a third of the number found in butter. In oleomargarine the minimum number found is 750,000 to the drachm, while in butter the smallest number seen is fully 2,000,060. The Lancet, which makes these statements, further says that it is tolerably certain that the number of organisms swallowed with a good piece of bread and butter may exceed that of the entire human population of Europe. Butter which has been kept for a time in a refrigerating box or specimens which have been freely sprinkled with salt show a decidedly smaller number.

Here's Enterprise.

The Chem. and Drug. describes the ingenious idea of a pharmacist in a town near Paris, for extending his trade by enlisting the services of the medical profession. He has issued a circular which relates the enormous cost of advertising his special product and showing that his income therefrom is not satisfactorily large. He therefore wishes to enlist the practitioners of medicine in a little scheme whereby they shall prescribe his product, and for each prescription be given a chance in a lottery where ten money prizes are arranged from 50,000 francs to 5,000.

"Qui Palmam Meriut Ferat."

It gives me pleasure to state that I have used 5 gallons of the Elixir Iodo Bromide of Calcium Comp. (Tilden's) and obtained better results than from any other alterative I have known in my twenty-five year's practice. I found it particularly useful in scrofulous and glandular enlargements: also in diseases of a syphilitic nature. It appears to agree well with the stomach.

Respectfully,

HUGH NELSON, M. D.,
Cor. Washington and Third Avenues, S.,
Minneapolis, Minn.

Albert Day, M. D., Supt. and Physician of Washingtonian Home, Boston, Mass., says: I have used Cactina Pillets and find them very valuable in common heart troubles when weakness and irregular action is manifested. I shall use them in the future.

Antiseptics in Typhoid Fever.

Besides the general antiseptic management of this disease (disinfection of the room, of the stools, etc.), it is to-day believed by many good clinical authorities that intestinal antiseptics is both practicable and easily attainable, and that such antiseptic medication is obligatory on the practitioner. Others (perhaps equally successful practitioners) have little faith in the possibility of intestinal antiseptics, as, clearly, we cannot be sure that medicines administered by mouth will ever reach ulcerated patches in the small intestine so as materially to modify them. "For my part," says Jubel-Renoy, "I have not ceased to teach that this kind of treatment is a delusion, that the thing, i. e., the antiseptics, is in no sense realized, as the labors of Furbringer have abundantly proved, and as Stern has still more recently demonstrated. This author, in causing typhoid patients to ingest cultures of bacillus prodigiosus, found this pathogenic agent abundantly in the dejections, even when these patients had been subjected to antiseptic treatments the most varied."

The physicians of the Johns Hopkins, the Massachusetts General, and other hospitals of this country, have, after suitable trials, declared against internal antiseptics as a routine treatment in typhoid fever. At the Johns Hopkins and the larger number of Continental hospitals the treatment by cold baths seems to have superseded every other, "rendering" (to quote the words of one enthusiastic advocate of hydrotherapy) "all other special treatments needless."

Doubtless extreme partisan views are not to be entertained. The judicious physician will "prove all things, and hold fast that which is good." The exclusive treatment by cold baths has much in its favor, but it is hardly practicable except in hospitals. The physician in private practice is generally obliged to limit himself to wet wrappings and frequent cold ablutions.

Can he assist the powers of nature and combat the local morbid processes by any internal antiseptics?

The affirmative is maintained by Bouchard, Smakowsky, Chauffard, Woodbridge, Legroux, Eliot, Pearson, Fussell, Hervouet, Peterute, Testi, Prince, Tarbox, J. Michell Clarke, and many others whose special articles on the antiseptic treatment of typhoid fever contain too much sound observation to be dismissed with a sneer.

We cannot presume to summarize all these contributions of the last five years, but will simply state what we believe to be the general principles of this antiseptic treatment, and the remedies best calculated to attain the end sought.

1. Intestinal antiseptics is certainly indicated in typhoid fever. Besides the general infection, there are the local effects—the intestinal ulcerations, the putrefactions which develop and which manifest themselves by the meteorism and fetid diarrhœa. These putrefactions and these lesions are a large factor in the morbid syndrome of the disease. If they can be opposed, much will be gained. There is reason to believe (as has long been taught) that the local intestinal lesions are the primary lesions.

2. Experience has proved that certain insoluble antiseptics, chief among which are charcoal, salol, salicylate of bismuth, benzonaphthol, produce a certain amount of intestinal antiseptics; they deodorize the stools and diminish their toxicity; they so far arrest putrid decompositions as to diminish abdominal tympanites. Most of the antiseptics above named are insoluble in the stomach, and cannot but traverse the entire alimentary canal. There is warrant for the belief that they not only diminish if not arrest morbid fermentations and the production of toxines, but that they reach and may modify the intestinal lesions, and that they may oppose *in situ* the pullulation of microbes. We believe that this affirmation is substantiated by the writers above named. By their local antiputrid action these remedies also oppose diarrhœa.

The above results are something, and in a desperate case may turn the scale in the direction of recovery.

3. There is a general consensus that the quantity of these antiseptics administered in a given case must be rather large. The relative harmlessness of such remedies as charcoal, salicylate of bismuth, salol, benzo-naphthol, is undisputed. Beta-naphthol may, says Bouchard, be given in capsules in doses of eight grains every three hours till the stools are completely deodorized and disinfected. Five grains each of benzonaphthol and salicylate of bismuth may be administered every three hours day and night. There is much testimony in favor of salol, which may be given in five-grain doses every two to four hours; according to Fessell, it promptly corrects the fetor of the stools, controls abdominal pain and arrests diarrhœa.

Bouchard has obtained seemingly good results from powdered

charcoal. He has found that with large doses he could completely deodorize and decolorize fæcal matters and diminish their toxicity. The dose which he has been in the habit of giving is a tablespoonful every two hours. He now prefers naphthol β and bismuth salicylate.

Of all the intestinal antiseptics, says Trouessart, benzonaphthol is the best.

F. Henry and Testi extol thymol as an intestinal antiseptic of great value. The dose is about two grains every six hours. The results which they claim are startling. Thymol, like naphthol, is very insoluble.

Dr. Barney Yeo (Lancet, April 18, 1891) claims remarkable success from a mixture of chlorine and quinine, and insists that the diet in typhoid fever should be limited to the amount of nourishment which the patient can assimilate. If more than can be absorbed is administered, there is the more material for intestinal fermentation and putrefaction. Typhoid patients are too often systematically stuffed as a part of routine treatment, and diarrhœa and putridity are kept up by the decomposition of accumulations of food that cannot be absorbed. Hence one important part of intestinal antisepsis is to give such bland liquid nourishment as can be readily appropriated, and in moderation.

Modern antiseptic therapeutics has given us hints as to the real action of many remedies which were formerly prescribed from empirical considerations. Small doses of calomel in typhoid fever with menacing symptoms, given even till the gums were touched, formed a part of the routine treatment of the late Geo. B. Wood (a practice not to be commended at the present day), and it will be remembered that the oil-of-turpentine treatment originated with this same physician. "More lives would be saved," said Dr. H. C. Wood, "if the oil of turpentine were more freely used in this disease."—*Medical Age*.

Uterine Tonic.

Some medicines act specifically upon the uterus. Notably among these are viburnum prunifolium, cohosh, skullcap and aletris, all of which are active ingredients of Dioiviburnia, in which are combined also antispasmodics and tonics that render it efficient in all menstrual disorders. Try Dioiviburnia in uterine diseases.

Heart Failure.

Prof. Alfred L. Loomis, M. D., LL.D., read recently before the American Climatological Association, a paper on Heart Failure.

He includes all heart failure in three classes :

1. Those in which the heart has for a long time been called upon to perform an abnormal amount of work, as in valvular or arterial disease.
2. Those in which obstructive changes in the coronary vessels markedly diminish the nutritive supply of the cardiac muscle.
3. Those in which toxic influences act directly upon the nutrition of the muscles, or so interfere with the cardiac nerve supply as to lessen cardiac resistance.

He concludes with this excellent advice, in his summary of his conclusions, as to the lessons taught by the facts demonstrated. He says :

"However we may explain it, clinical observation teaches that some chronic and many acute infections so diminish heart power that sudden heart-failure occurs in hearts that previous to this infection were of normal integrity. It then becomes of the utmost importance, in all toxic conditions, to watch for the first indications of cardiac weakness. On this principle Stokes based his great rule for the use of alcoholic stimulants in the treatment of typhoid fever, when he directed, 'that in every case of fever, if the first sound of the heart became indistinct, stimulants should immediately be given in sufficient quantities to restore the heart tone.' It is on this principle, also, that strychnia upholds an alcoholic heart in pneumonia, by restoring or increasing its nerve supply. A rule which for a long time has governed me in all toxic conditions is, not to wait for signs of commencing heart failure, but to begin the administration of alcohol, strychnia, and other heart tonics early, and thus, if possible, save my patients from fatal heart-failure.

"A review of the cases which I have presented makes it evident that the term heart-failure is misleading and should be abandoned, for, in most instances, it does not express the pathological state. It is equally evident that the term 'death from heart-failure' is often used to cover the ignorance of the medical attendants."—*Medical Age*.

Ectopic Gestation.

Pinard (Br. Med. Jour., Nov. 12, '92,) reports twelve cases of extra-uterine pregnancy in which the fetus died, and operation was performed after the sixth month. Eleven recovered. In only one case was there any history of previous disease of the genital tract. In all abnormal symptoms appeared before the end of the first month, due to peritonitis and to intestinal and vesical irritation. In most of the cases no decidua was passed. Pinard declares that he has noticed 'strong contractions of the wall of the sac, as in a normal gravid uterus.

The fetal sac is in many cases more accessible from the vagina than from the abdomen. Two out of Pinard's twelve cases were elytrotomies, the remainder being abdominal sections.

The surgeon is by no means justified in removing the sac in all cases. The indication is what the French conveniently call simple exteriorisation of the cyst cavity.

Rupture of the sac late in pregnancy may not cause either peritonitis or hemorrhage. The intestines may tolerate the presence of a fetus free in the abdominal cavity. In Pinard's opinion after the fetus has been three months dead the placenta may safely be removed complete during the operation. Death of the fetus may involve grave, acute symptoms, as in Pinard's fatal case, where there was urticaria and suppuration, rupture of the cyst and peritonitis.—*Brooklyn Medical Journal*.

Relief for Toothache.

Melt white wax of spermaceti, two parts, and when melted, add carbolic acid crystals, one part, and chloral hydrate crystals two parts; stir well until dissolved. While still liquid, immerse thin layers of carbolized absorbent cotton wool and allow them to dry. When required for use a small piece may be snipped off and slightly warmed, when it can be inserted into the hollow tooth, where it will solidify. The ease produced by this simple method is really very great.

Prof. Keen says a good point to bear in mind in diagnosing a case of Chancre is that you will never find chancres on the walls of the vagina, as they always appear on its outlet.

Cystitis.

Lavaux states that in tuberculosis of the bladder, examination of the urine reveals, besides Koch's bacillus, other micro-organisms, especially the bacterium coli. The treatment of these secondary vesical infections is of great importance and must be undertaken with great care. Sublimate has little effect, but nitrate of silver is very useful, if injected into the bladder in solutions of the strength of one or one-and-one-half parts in a thousand, the injections being repeated every two or three days. If the secondary infection has extended upwards, internal treatment must be employed besides the local.—*Int. Klin. Rundschau.*

Parke, Davis & Co. have just issued, for gratuitous distribution to inquiring physicians, two valuable brochures, one entitled "Acometric Syllabus," and the other "Biologic Therapeutics."

The first named work embraces 42 closely printed pages, giving diseases and indications in each, which may be met by the use of Diurnules and Diurnal Tablet Triturates. It will be of much interest to practitioners requiring a system of medication involving the most certain remedies in the minutest form.

Under the head of "Biologic Therapeutics," are furnished reprints of the lecture of Hector W. Mackenzie, M. A., M. D., (England,) on "The Treatment of Myxœdema and other diseases by the use of certain Organic Extracts," also an illustrated paper by Edward Carmichael, M. D., Edinburg, on "Cretinism treated by the hypodermic injection of Thyroid Extract and by Feeding," besides excerpts from prominent medical journals upon the use of the Thyroid gland in therapeutics.

Either or both of these pamphlets will be mailed free to any physician applying to Parke, Davis & Company, Detroit, Mich.

The Effect of Smoking Tobacco on Boys.

Among 32 school boys, who were examined by Decaisne, between the ages of 9 and 15, of whom all smoked, he found that 22 suffered from disturbances of the circulation, of digestion, mental relaxation and decided taste for alcoholic liquors; 8 of these were suffering from anæmia and from intermittent pulse.—*Der Kinder Arzt, 1893.*

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Fig. 1.

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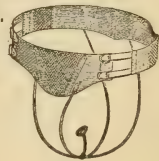


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It is wonderful, when one comes to think of it, how many diseases are caused by congestion, and also how many diseases can be cured by relieving or removing the congestion. When there is too much blood in the head, causing what is called cerebral congestion, or congestive headache, we have an infallible remedy—one that is always handy, always pure, and always of uniform strength. This valuable remedy is known to every physician in America and Great Britain as Peacock's Bromides. If this preparation fails to relieve, one always knows that either the diagnosis is wrong, or a substituted preparation has been used; therefore, the genuine Peacock's Bromides is an infallible test as to the character of the headache. The same is true in regard to uterine congestion, congestion of the lungs, throat, kidneys, bowels, etc. If, then, so many diseases are caused by congestion, it naturally follows that, the cause being one—congestion, the cure is one—to remove the congestion, the remedy is one—Peacock's Bromides, together with whatever collateral treatment they may be indicated.

Hereditary Syphilis.

The following formula has been used with the most gratifying results in cases of infants, two or three months old, afflicted with hereditary syphilis ;

R Elixir Six Iodides (W-G's).....	℥ i
Syr. Simplex.....	℥ vii
Sig. Teaspoonful to be given three times a day.	

The Elixir Iodo-Bromide of Calcium Comp.

Prepared by the Tilden Company, New Lebanon, N. Y., is a standard preparation, as might be expected from the world-wide reputation of the house from which it emanates. As an alterative in syphilis, scrofula, tuberculosis and all diseases of the blood, it rarely fails to produce the most satisfactory results, while it is pleasant to take and always acceptable to the most irritable stomach.

A correspondent of the British Medical Journal states that at one time in India, when cholera was prevailing, a woman swallowed a fly that flew into her mouth. In a few hours she developed a fatal cholera.

Kumysgen.

One of the most important and valuable requisites for the sick room is Reed & Carnrick's Kumysgen. It possesses every requisite of a perfect food. It is especially applicable to those conditions where patients cannot take ordinary food. It is highly nutritious, containing fully one-third of albuminoid matter. It is prepared by Messrs. Reed & Carnrick in the form of a dry powder, and sent out in special syphon bottles, by the use of which, in a very few minutes, a very palatable, highly nutritious drink can be made. The casein in it is in such a finely divided and soluble form that the feeblest digestion will prepare it for assimilation. It will allay irritability of the stomach and will be retained when all other foods, even the old-style Kumyss and cold water, are ejected.

Having tried it lately in a series of cases in which irritability of the stomach was a marked feature, and forced nutrition essential, fully justifies me in its highest commendation as a most excellent food product.

It is far less expensive than any other form of Kumyss and in every way preferable. It is superior to ordinary milk, always uniform in quality, free from disease germs and adulterants, requires but little effort on the part of the digestive organs for its assimilation, and the directions accompanying each bottle for its preparation are so plain that any one can understand them.

Settled Out of Court.

The suit of Dr. Charles E. Simmons against the executors of the estate of the late Samuel J. Tilden, of New York, for professional services for eight years, up to the death of Mr. Tilden, has been settled out of court, the defendant agreeing to pay Dr. Simmons at the rate of \$5,000 a year for the eight years' service claimed by him, with interest up to the date of Mr. Tilden's death. The case has been pending five years. Dr. Simmons sued for \$143,300, with interest. He claimed that he had a verbal agreement with Mr. Tilden whereby he was to be paid \$50 a day for his services.

We are generally so carried away by the last words of famous personages, that we never pause to reflect that the first words of these same heroes were "goo, goo, goo!"—*Puck*.

The True Physician.

Dr. T. Frazer Thomas, of Gainesville, Florida, is the author of the following sentiment touching the relations of the medical man to the lowlier members of his constituency: "The true physician will respect the feelings of the poor, both by language and tone of voice in which he addresses them. He will remember that disease is his only passport to any house. He will act as a gentleman to all, to the low, to the vile even, as well as the gentle and the rich. His duty is to heal, not to punish. Boerhaave said that 'the poor are the best patients, for God is their paymaster.' Because the physician receives no tangible recompense, he must not forget his obligation to his patients nor his own self-respect. In his intercourse with the world he must not be swayed by prejudice or nationality. Friendship and good will for all his patients are his polar stars, ever keeping in remembrance the priceless precept: "There is but one country—the earth; but one nation—the human race.'"—*Notes on Pharmaceutical Products.*

Ligation of Veins for Impotence.

King (Boston M. and S. Jour.) attributes some cases of loss of sexual power to enlargement of the penile veins, especially those that do not pass under the public arch, and are not compressed by the erectors. Repeated engorgement enlarges these veins, and the blood escapes more rapidly, rendering sustained erection impossible. In an illustrative case, he ligated two of the veins, under cocaine, and severed them between the ligatures. In five minutes he had an erection, and that night had one so energetic that he had to apply cold water. Two months later he reported a complete cure.

We suggest to the publishers of the Medical Record to place among its art publications for physicians' offices the following extracts from the pages of its journal, to be painted in colors and neatly framed:

"If physicians only knew how much more they could gain by being tolerant rather than critical, courteous and friendly rather than distrustful, they would make some mighty efforts towards becoming always and everywhere gentlemen."—*Medical Times.*

The Doctor a Gentleman.

Dr. T. B. Greenley, in the *American Practitioner and News*, has written a little essay on "Why and How the Doctor should Be a Gentleman," and by a gentleman he does not mean that special class technically so-called in monarchical countries, but a gentleman in the American sense, as Emerson has defined it. He means a person who is always considerate of others, who is courteous, kindly and sincere. Dr. Greenley rightly says that there is much unnecessary hard feeling, ungenerous criticism, petty quarreling, and that there are many childish enmities and jealousies among medical men. Their work is made the harder thereby, their life less pleasant, their opportunities for mutual help restricted. In a town with a dozen physicians note the number who speak cordially to each other or of each other. They are as rare as righteous men in Sodom. Strange to say, each one has an excellent reason for his dislikes. Dr. A. is inclined to advertise, Dr. B. took a case away from him, Dr. C uttered some slanderous remarks about his way of treating a certain case of diphtheria, Dr. D is ignorant and plainly incompetent, and Dr. E is young and thinks he knows more than the rest already. So the comments run, and with each word another character dies.

But the true gentleman remembers that he himself, as well as all his brother men, are imperfect beings. There may be an excuse for the ill-natured remark or the ungenerous conduct. Perhaps the story was false. At any rate, a generous and kindly attitude toward the brother would be better in the end, for it would make him ashamed of himself.

If physicians only knew how much more they could gain by being tolerant rather than critical, courteous and friendly rather than distrustful, they would make some mighty efforts toward becoming always and everywhere gentlemen.—*N. Y. Medical Record*.

Cod Liver Glycerine.

This is the best reconstructive in all wasting diseases now on the market. It is pleasant to take and contains all the elements necessary to reconstruct a shattered constitution. It is now universally prescribed by physicians. Prepared by the Cod Liver Glycerine Co., St. Louis.

The Justifiable Prevention of Conception.

The physician not infrequently has to warn against conception in cases where a pregnancy would endanger the life or the health of the patient. Pelvic contraction, abdominal and uterine tumors, etc., form such an indication. The advice to abstain from coitus is but seldom followed, and the means usually employed to prevent gestation (mechanical) are objectionable from a hygienic and ethical point of view. Kleinwachter has endeavored to find a remedy which would have none of the aforementioned drawbacks. He prescribes a cacao-butter suppository containing 10 per cent. of boracic acid, to be introduced high up into the vagina. These suppositories dissolve in about one hour, and the liberated acid destroys the spermatozoa. Bichloride of mercury in 0.001 gramme doses can also be used, but in that case a vaginal douche has to follow the sexual act. The solvency of the suppository is heightened by adding one grain of oleum olivæ. The author considers this a safe and sure remedy to prevent conception. Therapeutic effects may be combined by the adding of various drugs—for instance, tannin in cases of uterine catarrh.—*Medical Age*.

Calolactose is composed of Calomel and Subnitrate of Bismuth, each 1 part, and Sugar of Milk (lactose) 8 parts. The mixture is urated constantly for at least ten hours in steam triturators. Physicians will find this preparation to excel all other preparations of triturated Calomel in efficacy and mildness of action, and may in most cases be prescribed in doses in which Calomel is itself ordinarily given, both in chronic and acute cases. Its mildness is largely contributed to by the Subnitrate of Bismuth. In doses of one grain, repeated every hour until three to five doses are taken, it acts as an energetic aperient. It is recommended that it be administered in lemonade. Physicians are cautioned against using extemporaneous mixtures of Calomel, Subnitrate Bismuth and Sugar of Milk, as they will be inevitably disappointed, as the efficiency of this preparation is due so largely to the extended trituration, which cannot be obtained by hand.

The urethritis caused by bicycles bears a close family resemblance to gonorrhœas contracted in water closets or bad beds.—*Medical Fortnightly*.

Vomiting of Debility.

Dr. Smith cites a case where a British officer suffered intensely from obstinate vomiting and a great debility as a sequence of malarial fever. He tried all known agents reputed as useful in such conditions, but they only had a passing effect. As a last resort he tried strychnine in large doses, and was surprised to find that within twenty-four hours it had controlled the condition and continued to control it effectually, so that after a few weeks the patient, who was almost like a living skeleton, became fit to go about and do light duty. The movements of the stomach in the above case seem to have been due to the arrangement of the centers which preside over it, whereby the stimulus of food, which in health excites the physiological rhythmic contractions of that organ, in the diseased and inevitable condition in question, was sufficient to excite the act of vomiting.—*British Med. Jour.*

The Iowa State Board of Medical Examiners has passed the following resolution in reference to the recognition of medical colleges:

WHEREAS, a number of medical colleges in the United States and Canada have adopted and require a four years' graded course of medical lectures as a condition of graduation, and others have expressed the determination to do so; therefore,

Resolved, That after July 4, 1898, no medical college shall be recognized by this Board as "of good standing" within the meaning of Section 1, Chapter 104, Laws 1886, that does not require as a condition of graduation four graded courses of medical lectures of not less than six months each—no two of which said courses shall be within the same calendar year. That graduation from any College of Dentistry, and Veterinary Medicine, or of Pharmacy, upon a satisfactory examination in anatomy, recognized by this Board as of good standing, may be accepted as the equivalent of the first year's course of medical lectures by colleges requiring as a condition of graduation the graded courses above specified.—

Review.

A physician was represented in Egyptian hieroglyphics by the picture of a duck. Our advices do not state whether this was because he was looked upon as a quack, or because he was a favorite with the fair sex.

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Miscellaneous.

Supra-Vaginal Hysterectomy Without Ligature of the Cervix, in Operation for Uterine Fibroids—A New Method.

BY B. F. BAER, M. D.

The author states that his experience with the method was based upon a series of nine cases, all of which had made a quick recovery, and with scarcely an elevation of the temperature. The majority of the cases might be classed as difficult, three of them extremely so, thus putting the method to a severe test. Moreover, the operations had all been performed within the past year, and during the same period he had removed the uterus five times by total extirpation, four for malignant disease and one for fibroid tumor. He had, therefore, had ample opportunity within a short space of time to observe and compare the advantages and disadvantages of the two methods. There was at least one point in hysterectomy which might be regarded as practically settled, namely, that the extra peritoneal treatment of the pedicle by the serreneud and fixation in the lower angle of the wound, as practiced by Pean, Bantock and others, had its day and was gradually being abandoned. Pean himself, to whom the credit was due of having first devised a rational method for the extra peritoneal treatment of the pedicle, declared that he had now instead adopted total extirpation. By this action Pean had simply reaffirmed his fear of the faulty intraperitoneal method, and had gone to the opposite extreme in thus placing himself in line with those who leave no cervix at all. It is claimed that total extirpation does not leave a stump; but this claim is not valid, for anyone who has performed this operation is well aware that there is not only one stump but several which must separate and come away by a sloughing process. It was true it had the advantage of furnishing drainage through the opened vagina, and it was well that it did so, for drainage was quite necessary after this method. Now, he believed total extirpation to be unnecessarily radical; for even though the mortality should prove to be not any greater, the advantages in prolonged operation, greater mutilation, and consequent sloughing, followed by contraction and deformity of the vagina, made this operation one to be avoided in all cases of malignant disease, if the

supra-vaginal operation could be done by a method which was devoid of the objections which had always attended it.

Method.—After the required abdominal incision is made, all existing adhesions of omentum, intestines, etc., are separated in the usual way, and the tumor lifted out of the abdominal cavity. If the incision has been an unusually lengthy one, several sutures are then placed at its upper end, for the better protection of the intestines. The patient may now be elevated to the Trendelenburg posture, if deemed best, and the parts thoroughly studied, so that a clear idea as to the character and location of the tumors and pedicle may be obtained before the ligation and separation are begun. The first step in the operation is the passing of a single silk ligature through the broad ligament near the cervix. This ligature is again made to transfix the broad ligament near its outer edge, to prevent slipping; it is then tied. A stout pedicle forceps is next placed under the Fallopian tube and ovary, and made to grasp the broad ligament, for the purpose of preventing reflux from the uterus. The ligament is now severed just below the forceps, the incision being carried close to the tissues of the tumor. If deemed necessary, another ligature is now passed through the broad ligament farther down along the side of the cervix. This ligation and cutting are now repeated on the opposite side. The knife is then run lightly around the tumor an inch or two above the peritoneal reflection of the bladder in front, probably a little lower behind, and the severed edge of the peritoneum stripped down with the handle of the scalpel for the purpose of making peritoneal flaps. The next step is a most important one; it is the ligation of the uterine arteries. This is done in the broad ligaments, outside of but close to the cervix. Care must be taken to avoid the ureter on the one hand and the cervical tissue on the other. The ligature may either be placed within the folds of the severed ligament, or, which is preferable, made to encircle the double fold of the ligament and artery in one sweep; action here will depend upon the size of the pedicle and the consequent separation of these folds. The constant traction which is made upon the pedicle by the assistant, who is holding the tumor, serves to draw out and elongate the cervix after the peritoneal covering has been incised, and to thereby permit deeper incision into the neck, which is next amputated with the knife by a sort of cupped incis-

ion. The stump is now grasped with a small volsella forceps, and further trimmed and reduced, if necessary, so that the entire supravaginal portion is removed before it is dropped back into the pelvis. The cervix being now released, it immediately recedes and is drawn deeply into the pelvis by the retractive and elastic properties of the vagina, where it is buried out of sight by the peritoneal flaps covering it. These flaps have been rendered so taut by the ligatures which have been placed that usually, as the cervix recedes into the pelvis, they close over it like elastic bands. The cervix is now in its natural position, and without a ligature or suture in its tissues. The operation is finished by infolding the edges of the peritoneal flaps, which may be secured by Lembert sutures if necessary. He had not found this necessary if the ligatures which secure the uterine arteries had also grasped the severed folds of the broad ligaments, for this so tightened them that the sides were brought forcibly together when the cervix was drawn under. The bladder and surrounding tissues aided also in closing the pelvic cavity. Nothing whatever was done to the cervical canal. The portion of the broad ligament embraced in the first ligature was the same structure which formed the ordinary ovarian pedicle, minus the Fallopian tube. The other ligatures closed the opened broad ligament, as a rule. If any other vessels were found spouting, they were, of course, ligated. He had not found it necessary to employ the temporary elastic ligature. The steps of the operation varied somewhat to suit the complications which might be present in the individual case, but the general direction and the conclusions were practically the same in all cases.—*Denver Med. Times.*

The English Doctor's Vacation.

Mr. Ernest Hart very amiably and sincerely states in one of his recent papers on matters connected with his recent visit to America, that it is idle and foolish for any British doctor who has the leisure and the necessary means to think of spending his autumn elsewhere than in America.

Judge—What proof have you that your husband has been untrue?

Irish Woman (suing for a divorce)—O'im shure he is not the father of me last choild.

Antiseptic Cathartic.

Eichler employs the following prescription as a cathartic and internal antiseptic :

R	Salol.....	3j.
	Castor Oil.....	3vj.
	Syrup of Rhubarb.....	3iss.
	Cinnamon Water.....	3v.
	Powdered Gum Arabic.....	q. s.

Make into an emulsion, and administer 1 tablespoonful every hour until a purgative effect is obtained, in cases of chronic diarrhoea, or else one full dose may be employed, using at the same time a disinfectant rectal injection, containing 15 grains of salicylic acid to a pint of distilled water. The diet should be composed principally of milk and beef tea.

Enlarged Prostate.

True hypertrophy of the prostate is a disease of old age, and one of the troublesome and annoying conditions that but few old men are free from. After fifty-five years of age most men suffer with hypertrophy of the prostate. It seems to be one of the idiopathic conditions of old age. It may always be relieved, and the enlargement rendered less troublesome, by the use of Sanmetto, teaspoonful four times a day.

Hard on Time.

No wonder Time is represented as haggard and worn out; a watch keeps time, the chorister beats time, the clock strikes time, trains run on time—not all, but some of 'em—the foreman lays out time, people threaten to do things if they get time, soldiers mark time, criminals serve time, few can spare time, everybody now and then tries to kill time, and perhaps your subscription is behind time.

Ergotol S. and D., and Webber-Pepsin S. and D., illustrate true pharmaceutical progress. Both are ideal products, being more concentrated, permanent, palatable and active than any other preparation of Ergot or Pepsin in the market. As samples can readily be obtained by addressing Sharp & Dohme, of Baltimore, we trust our readers will avail themselves of the opportunity and at the same time favor us by mentioning the Charlotte Medical Journal.

The Crook of the Cycle.

The wide diffusion of the bicycle as a means of locomotion (Jour. of the American Med. Association) as well as an agent of pleasant pastime, has introduced into orthopedic surgery a new factor in the production of spinal curvature. When the wheel came into use the handles were long and the rider sat upright. The followers of Father Jahn encouraged it, and well informed physicians saw in it a new instrument of physical culture.

The desire for increased speed and record breaking lessened the diameter of the wheel and shortened the handles, so that now you may see on any fine day whole troops of cyclists spinning along with their backs arched over the lever, and as the victim must see where he is going, he raises his chin, and the back of the head approaches the shoulder blades. Thus a double-antero-posterior curvature has its foundation laid; constant humping the back could do no less.

It is not intended to convey the idea that cycling should be abolished; on the contrary it should be encouraged, but cycles should be so constructed that the rider may sit upright like a man, and not double up like a hunchback or professional contortionist. In the latest patterns of bicycles we see wherein true scientific physical culture has been made to give way to the demands of the professionals. The amateur should be encouraged, for he rides for health and pleasure; while the professional rides for the money he can win by it. It was professionalism that ruined the Greek gymnasia, and professionalism has now converted a healthful and innocent amusement into a dangerous diversion.

The Twin Half-Minute Thermometer.

Manufactured by J. Barry, 62 Fulton street, N. Y., has no superior in the market. We have never yet heard a complaint from physicians who have used it. Order one for trial and mention the Charlotte Medical Journal in addressing the manufacturer.

The following epitaph is said to be engraved upon a tombstone in Lincolnshire :

"Here lies the body of Johnny dear,
Snatched away by the diarrhoea."

Body-Snatching.

Five men have been arrested in Des Moines, Iowa, for body-snatching. They were caught in the act of taking a body from potter's field. It is supposed that the cadaver was to have been used for anatomical purposes. The penalty of such an act is a fine of \$2,500 or two years in the penitentiary.—*Courier Medicine.*

An Aluminum Drainage Tube.

The Paris correspondent of the *Lancet* describes an electrical system, recently invented, to be used in a hospital ward in much the same way as an automatic fire-alarm system in a mill. Each patient is to have in his axilla an apparatus connected with an electric enunciator, which rings an alarm if the temperature rises above a certain point.—*Medical Age.*

A Recent Coroner's Jury's Verdict.

At Highland, New York, the body of a drowned woman was taken out of the river recently. A jury, regularly constituted for the holding of an inquest, is reported to have rendered the following verdict: "We do say upon oath that the deceased came to her death by being found in the Hudson river, cause of death unknown."

Cholera.

Reports from Cairo show that the cholera, which appeared in Mecca, June 9th, is increasing, there being over 200 deaths daily. In Southern France there have been 704 deaths since May, 138 deaths having occurred in Marseilles in the last four weeks.

A Specific for Vomiting in Pregnancy.

R Chloroform.....	3 ss.
Dioiburnia.....	3 ij.
m	
Sig. Dessert-spoonful in hot water every hour or two.	

He's Got It!

A Texas doctor announces in an exchange that he has a "positive, harmless and permanent" cure for cancer. The remedy is employed, both locally and constitutionally.

IF YOU WANT A Gold Pen with Handsome Pearl Holder,
Pencil, Watches, Diamonds, Gold Headed Canes or Umbrellas, Rings, Pins,
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Spectacles and Eye Glasses, or anything kept in a first class Jewelry Estab-
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"To be out of style is to be out of the world." Your name artistically engraved on one pack of cards and plate furnished you for only \$1.25.



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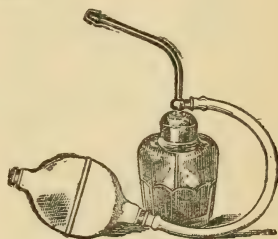
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"TYRIAN" No. 15 ATOMIZER.

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is situated on the west side of Farragut Square, at the junction of 17th and K
streets and Connecticut Avenue—the most beautiful and healthful part of Wash-
ington. Number of patients limited to seventeen. All rooms face the street and
have open fire-places and electric bells. Marble operating and bath rooms with
latest and best equipment. No pregnant, contagious, or insane cases received.
Each patient has a room to herself. A small ward has also been fitted up con-
taining three beds where surgical cases are received at one third the usual rates
when necessary. Nurses trained by Dr. Johnson are in attendance.

For further information address 1728 K Street.

Ingleside Retreat FOR DISEASES OF WOMEN.

Scientific treatment and cures guaranteed. Elegant apartments for ladies before and during confinement. Address

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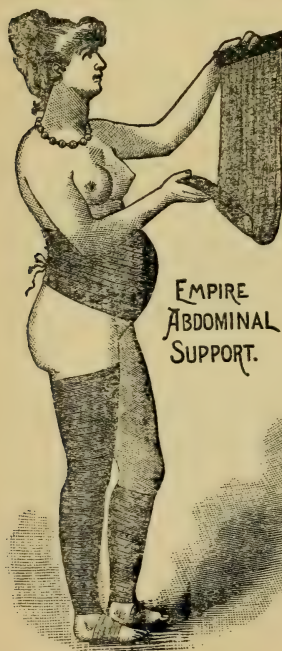
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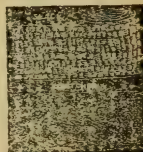
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**THE EMPIRE
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The most elastic and absorbent
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Price, 3 in. by 5 yd., \$1.00.



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Coolest, Most Comfortable and Best Supporter in the
World. Price, 8 in. wide, \$2.50; 11 in. wide, \$3.00



The Empire Umbilical Truss is an 11 inch supported
with button inserted at the navel. Price, \$4.00.

All of above prices are net to physicians. We send
all our goods free by mail, upon receipt of price, and
refund money if not satisfactory.

EMPIRE MANUFACTURING CO., Lockport, N. Y., U. S. A.

Alcohol.

Is alcohol a stimulant? Is it a food? Is it a conservator of tissue? Can it rehabilitate exhausted vitality?

Can it, in any quantity, maintain and increase the natural heat of the body, and thus enable the subject to withstand prolonged exposure to cold with greater safety than without it?

Does it in any way, or when taken at any time, or under any circumstances, assist in the digestion and assimilation of food?

Can it, under any circumstances, assist in the digestion and assimilation of food?

Can it, under any sort of circumstances, intensify the good effects of other medicines, either by assisting in their absorption and assimilation or otherwise?

A careful research into the nature and effects of the article in question, will convince any unprejudiced physician, that only a negative answer can be given to every one of these questions.

Again, is it safe to administer alcohol, in any form, to patients in critical conditions, when they are vibrating between life and death? In chloroform narcosis? In profound coma? In collapse? In heart failure? During the crisis in typhoid fever? In threatened death by exhaustion from post-partum hemorrhage?

In short, is it safe to administer alcohol under such circumstances and conditions as we have been taught imperatively demand its use?

Only negative answers can be made to all these inquiries.

A few years back, I thought alcohol, in some form, indispensable as collateral treatment in pneumonia and many other forms of acute disease, and materially beneficial in almost all forms of chronic disease, but my own personal observation has taught me that it is not only useless, but *dangerous*, and the more its use seems to be indicated, the more *dangerous* it is.

One tablespoonful of *hot* sterilized milk is worth more to a patient, whose vital tenacity is at low ebb, than any amount of alcoholic liquors, in any form, possibly could be.

If any physician who reads this, doubts the correctness of these statements, let him try the experiment on himself, by taking a tablespoonful of good (?) whisky and *closely watching its effects*. He will find that its first effect seems to be that of a diffusive stimulant, but it is only momentary and ceases before absorption and

assimilation could possibly have taken place, and is rapidly succeeded by a feeling of depression even greater than the momentary impulse of exhilaration was, and causes a *decided demand for a stimulant*. This proves, beyond doubt, that instead of supplying a demand already existing, it only serves to create a new one.—E. L. VENABLE, M. D., Pearl, Ind. Ter., in *Medical Brief*.

Venereal Sores.

Don't cauterize a sore or excoriation on the penis until you find out its character, for the caustic action may mask the true nature of the lesion so as to leave your patient a lifetime of doubt.

For a herpes use a dry soothing powder, or the powder on absorbent cotton.

For a chancre, equal parts mercurial ointment and oxide of zinc ointment is a pretty good dressing, but you will not hasten the cure much.

Thorough cleansing of a chancroid and a good antiseptic dressing is useful. Caustics don't help matters much in any of these, and may do much harm in herpes.

The Physician as He Is.

Search the world over and nowhere is to be found a class of men self-denying, so self-sacrificing of personal convenience and comfort, as are those of the medical profession. They minister to suffering and diseased fellow beings without stopping a moment to count the cost—the indigent pauper receiving the most careful and skillful attention as the most wealthy in the community. Neither hoping nor expecting compensation, he renders the service as gently and conscientiously as the priest ministers final consolation to the soul. The fact is not at all fully appreciated by the laity, some of whom complain of physician's exorbitant charges.

"Therapeutic Notes on Summer Diseases," by H. K. Mulford. Company, 2132 Market street, Philadelphia, Pa. Send to them for a copy, and don't fail to mention the CHARLOTTE MEDICAL JOURNAL. Physicians who received their "Therapeutic Notes on Winter Remedies" will be pleased to learn that they have issued this little manual on above subject, and won't delay in sending in their names for a copy.

Post-Partem Hemorrhage.

The almost universal cause of post-partem hemorrhage is a relaxed state of the uterus. After the child is born it is usual for the uterus to remain at rest for a time (perhaps twenty minutes) when contractions for the purpose of separating and expelling the placenta begin. As the placenta is separated from the uterine wall, the blood vessels are closed by the peculiar arrangement of the muscles and blood vessels. The time elapsing between the birth of the child and the birth of the placenta may be diminished by stimulating the uterus to contract by rubbing it when contraction occurs, hastening the expulsion of the placenta by compression after the manner of Crede. While too early separation of the placenta either by compressing the uterus, or what is worse, pulling on the cord, is usually promptly followed by a uterine contraction that closes the blood vessels, yet the saving of time is at too much risk of leaving the vessels open. After the placenta is delivered, the uterus should be watched and firm contraction insured by stimulating it on the slightest sign of relaxation by cold or rubbing. This is of value to prevent post-partum hemorrhage, and it will be appreciated by your patient as a preventive of after-pains. If, after twenty minutes to half an hour, the uterus remains well contracted and the pulse has diminished naturally in frequency, then, and not until then, may the patient be left. Of course, such accidental causes of post-partum hemorrhage as ruptured varicose veins in the vagina, lacerated cervix and the like, need not be considered, though it is well to bear in mind that a full bladder may interfere with the contraction of the uterus after, as well as before, labor is completed.

Dr. S. Pozzi, of Paris, has been commissioned by the French Ministry to proceed to the United States and to study the organization and installation of surgical laboratories and instruments used in the practice of surgery, as well as general questions of the teaching of medicine and surgery.

An autograph of Hahnemann was recently sold in New York city at an auction for \$20. The letter was written in Paris in 1841, when Hahnemann was 85 years old, the subject being the inscription of a tablet to be placed on the house where he was born in Meissen, 1755.

Turpentine in Typhoid.

Dr. J. J. Waller, of Oliver Springs, Tenn., revives this very old treatment (Denver Med. Times) so much lauded by Stokes and Graves in Ireland, and Dr. B. Wood in the United States. Dr. Waller states that under its use the mouth becomes moist and tympanites relieved.

The proper amount of turpentine in any case has to be determined by the effect it has in that particular case, for the state of the secretions is the guide to the amount used. It is well enough to bear in mind that turpentine sometimes deals harshly with the kidneys and brain, and in some instances it seems to be poisonous to the whole system, and cannot be borne at all. When such is the case, its bad effects may be overcome by combining it with other suitable remedies. The following is a good combination :

R	Spts. Turpentine.....	4½	drachms
	Pulv. Acaciæ	2	drachms
	Sacch. Albæ.....	2	drachms
	Tinct. Opii Camph.....	1	ounce
	Listerine	1	ounce
	Aq. Camphoræ.....	1	ounce
	Aq. Cinnamomi.....	1	ounce
M	ft. emulsion.		

The Face an Index in Health and Disease.

Incomplete closure of the eyelids, rendering the whites of the eyes visible during sleep, is a symptom in all acute and chronic diseases of a severe type; it is also to be observed when rest is rendered unsound by pain, wherever seated. Twitching of the eyelids, associated with the oscillation of the eyeballs, or squinting, herald the visit of convulsions. Widening of the orifices of the nose, with movements of the nostrils to and fro, point to embarrassed breathing, from disease of the lungs or their pleural investment. Contraction of the brows indicates pain in the head; sharpness of the nostrils, pain in the chest; and a drawn upper lip, pain in the abdomen. To make a general rule, it may be stated that the upper third of the face is altered in expression in affections of the brain; the middle third, in diseases of the chest; and the lower third in diseases of the organs contained in the abdominal cavity.—*Hygiene of the Nursery.*

Chloroform as a Hemostatic.

As a general hemostatic for the controlling of external bleedings, arterial, venous, or capillary, chloroform is most valuable. Applied on a dossil of lint or cotton wool to the bleeding surface, it promptly stays the blood, acts as a direct stimulant to the patient, and leaves no blood crusts to fall off and recommence the bleeding. It is peculiarly suitable for all abdominal operations, as it has no tendency to excite inflammation, either in the part to which it is applied or to any of the surrounding tissues.

As an antiseptic application it is more powerful than bichloride of mercury solution. The addition of gum resin has been suggested, but they would detract from the value of the application instead of increasing it, for the reasons which will occur to any person familiar with the use of solutions of gum resins.—*Medical Press.*

"Merck's Bulletin" has changed its name to the American (!!) Medico-Surgical Bulletin. Some one must have suggested to the editor that it was rather bad taste for the firm to issue a trade journal under its own name, the avowed purpose of which was the elevation (?) of the medical profession.—*Ex.*

A Powerful Uterine Sedative

Particularly efficacious in Engorgement, Inflammation and Induration of the Uterus, in Dysmenorrhœa, Menorrhagia, Leucorrhœa, Amenorrhœa, Prolapsus Uteri, Hysteria, Melancholia, Vomiting of Pregnancy, Habitual Abortion, and Uræmic Eclampsia.

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It is not a nauseous compound, but an elegant elixir. It is a practical Emmenagogue, a safe and reliable Parturient, Antispasmodic, Diuretic, and Tonic.

Formula.—Caulocorea is composed of the active principles of *Carlophyllum*, *Thalictroides*, *Viburnum Opulus*, *Prunifolium*, *Dioscorea Villosa*, *Mitchella Repens*, *Aletris Farinosa*, combined with Spts. *Ætheris Comp.* and *Aromatics.*

A Pound Bottle—Free

to any physician who will pay express charges and say this journal induced him to write. It is prepared solely for the use of physicians, and advertised only in medical journals.

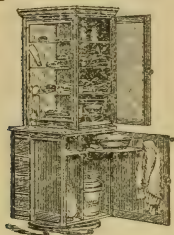
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Parlor Reclining Chairs.



The convenience and practical utility at once apparent. The upper section revolves and is thoroughly aseptic and absolutely proof against dust and dampness.



Convenient, Practical and Substantial.

Any position desired can
..be obtained instantly..



The
"Allison"
Examining
Table.



The pride and delight of every physician using it.

The numerous positions obtainable and the ease with which it can be adjusted from one position to another commends it once, and it never fails to please.

Write for catalogue, prices and terms.

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Buy 150 dozen pairs of one kind of socks from us every year. These socks are made in Germany by the finest stocking maker in the world. They are made of the finest long staple cotton, soft and fine gauge, they resemble silk. They have double toes and high spliced heels and are the best fitting, most comfortable and best wearing socks on the market.

The colors are tans, browns, slates and fast blacks.

25 cents a pair, by mail 2 cents extra.

YOU PAY 50 CENTS AND NOT GET AS GOOD.

ROGERS & COMPANY,

Everything in Clothing, Hats and Furnishings,

CHARLOTTE, N. C.

Please Mention Charlotte Medical Journal.

"Let There Be Kittens."

"Who makes the kittens, Jackie?" "Why, God makes them, Ethel. He doesn't make them as He does babies, one by one, but He just says, 'Let there be kittens,' and there are kittens."

For Alcoholism.

R Neurosine $\bar{3}$ viij.
Sig. Teaspoonful four or five times daily.

—THE—

College of Physicians and Surgeons,
CHICAGO.

Spring term begins April 17th and continues until July 1st. Fees for the term about \$45, which will be deducted from the fees of the Winter term. Full amount of work given in about one-half the regular courses, with final examinations and credits at the end of the Spring term. This is a good opportunity for men to attend the World's Fair and do some first-class medical study. The College is ten miles from the Exposition Grounds. No increase in living expenses about the College. One hour's ride to the Exposition. For announcement and further information address

DR. BAYARD HOLMES,
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FOR
Dysentery and Diarrhoea
OF CHILDREN

R **Iatrol** - gr. v.
Warm Water qt. j.

Inject into bowel every four hours until improvement is noted

Dr. J. H. Sackrider, of East andolph, N. Y., says: "The first case in which I used Iatrol in Dysentery was in treating a child two and one-half years of age, whose recovery was given up. I made a solution of 5 grs. in a qt. of warm water. This was introduced through a soft catheter as far into the bowel as possible. No more blood after the first washing—a few stools of mucous—then natural movements and a rapid and perfect recovery.

"I now use Iatrol in all severe cases of Dysentery, increasing or diminishing dose as indicated, using in *very warm water* every 4-6-8-12 hours, with the most happy results."

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Physicians can enter at any date. Entire Faculty on duty throughout the Summer. The building is the largest and most thoroughly equipped for Post Graduate instruction in the West. The Hospital contains 100 beds. The clinical material is abundant. Situated in the same section of the City are several large hospitals to which our Matriculates only are admitted. Special Clinics, lectures and demonstrations will be given by distinguished medical men from abroad during the World's Fair Season.

For information address the Corresponding Secretary,

MOREAU R. BROWN,
174-176 Chicago Avenue, Chicago, Ill.

THIS IS NOT AN APOLOGY.

WASHINGTON, D. C., July 28th, 1893.

I had stopped the further issue of my circular letter of May 15th, as Messrs. Parke, Davis & Co. had informed me that they would cease the sale of their so-called "Cerebrin" under my name. But as they have seen fit to publish in the medical journals, as an advertisement, under the heading of "An Apology," a tirade of abuse, almost every line of which expresses a falsehood, additional notice of these people seem to be requisite.

In this screed they give it as *their* opinion that *my* opinions are of no value. This is a point that I may well be excused from discussing; but as the second-named member of the firm in question, and the one who I understand is mainly responsible for the policy of his concern, is the publisher of two books of mine, "Spinal Irritation" and "Sexual Impotence," both of which he has lauded to the profession in what I must confess to be rather fulsome language, he is scarcely in a position to question the value of my opinions. The fact, too, that this firm was so eager to use my name in connection with their counterfeit "Cerebrin" shows that they continued almost up to the present time to attach some worth to my opinions. Who does not know that if I had allowed their disgraceful proceedings to go unchecked that my opinions in Messrs. Parke, Davis & Co.'s estimation would have retained their pristine value? I exposed them May 15th; therefore my opinions have been unentitled to respect for a little more than two months. "Happy is he," says Lucretius, "who is able to discover the causes of things."

And they conclude their advertisement by announcing that they will still continue to supply "Cerebrin" made after their own formula. A product which they have almost in the same breath acknowledged to be worthless; and which is worthless.

Now, let us see if we cannot, from Messrs. Parke, Davis & Co.'s conduct in regard to "Cerebrin" form some idea of the value of their other pharmaceutical preparations.

On the label of the bottle containing their so-called "Cerebrin" is this statement :

"NOTE.—While Dr. Hammond has recommended maceration of the brains for six months, we have modified his method so that we are enabled to thoroughly extract the valuable properties in much less time."

Here is a positive assertion that they have succeeded in extracting the "valuable properties of the brain of the ox." Did they make this claim recklessly and falsely, without verification, or did they really succeed, as they assert, in obtaining a valuable product from the brain tissue? If the former, what are we think of a firm manufacturing medical preparations that can seek thus to impose on the public? If the latter, how are we to reconcile their language with that of their latest publication, in which they offer "an apology" for introducing what they now declare to be worthless? Is not such conduct calculated to provoke a feeling of distrust in all the claims they make relative to the superior purity and efficacy of their manufactures? How are we to know, for instance, that they have established the truth of the statement they make in regard to their so-called "normal liquids," that—

"These preparations are adjusted to a uniform strength of assay, irrespective of the quantity of crude drug required, thereby imparting to them a definite therapeutic value."

There is a legal maxim that comes to mind in this connection. It is: "*Falsus in uno, falsus in omnibus.*"

In endeavoring to provide for the purity of the animal extracts, made according to my formulas, by placing the sale of them to the profession in responsible hands, and in superintending their manufacture, I have done nothing unprofessional. I have fully disclosed the methods of preparing these extracts, and Messrs. Parke, Davis & Co. know perfectly well that they or any one else can manufacture them with impunity, and may even announce them to the profession as being made by my formula, *provided* they are so made; but when Messrs. Parke, Davis & Co. modify my formula, refuse to tell me in what the modification consists, and then announce that the product is made in accordance with my method, they are guilty of conduct that most people would look upon as nefarious, and practically scarcely, if at all, to be distinguished from the act of getting money under false pretences.

It is certainly not to be expected that I should gratuitously provide the public with animal extracts any more than that I should give them my books. Pasteur, Brown-Sequard, Koch, and others who have made important discoveries in medical science are surely entitled, while creating no monopoly in any healing process, to reap some pecuniary reward for their labors, and the propriety of their doing so has never been questioned. Would it be just and right that Dr. Marion Sims, Dr. Weir Mitchell, and others who have advanced therapeutics, should refrain from establishing hospitals in which their peculiar methods of treatment can be carried out under their supervision? Do we not all expect something more than mere thanks for our work. The charge of being mercenary comes with a bad grace from a drug firm that has never made a single advance in pharmaceutical science, but has gone on year after year watching the procedures of other more original workers and appropriating the results of their labors as soon as they have perceived that money was to be made by so doing.

It would be easy to adduce many instances showing the imminent predatory characteristics of this firm; they have filched right and left, and have even had the hardihood to publish a record of their incursions into other realms not their own. Wherever they saw a valuable discovery, they sailed in to avail themselves of it, nor have they confined themselves to the pharmaceutical profession. Scientific monographs have not escaped them, and with a boldness that would have been admirable if displayed in a good cause they have not hesitated to pirate whatever they thought would advance their trade interests. Here, too, I have been their victim, for without my consent or that of my publishers, Messrs. Appleton & Co., and even without our knowledge, they reprinted in pamphlet form my original paper on the animal extracts, knowing the same to be copyrighted, and sent it broadcast through the country in furtherance of the sale of their bogus product. If this is not a pre-eminent instance of their turpitude, it would be difficult to find one.

It would be interesting to know just what modification they made in the original process. The probabilities are a thousand to one that it was nothing more than shortening the period of maceration to a few days, and this could only have been done with the "mercenary" ("I thank thee" [Messrs. Parke, Davis & Co.] "for teaching me this word") object of forestalling the market and getting a quick return for their money.

And what were the "valuable properties" that they declare they extracted from the ox brains? And why did these "valuable properties" suddenly disappear soon after May 15? These are questions the answers to which I am going to wring out of Messrs. Parke & Co. if there is anything to be gained by the most obdurate persistency.

Finally, I have no disposition to deal hardly with Messrs. Parke, Davis & Co. They have, it is true, been guilty of a mean crime; but I have been actuated more by a desire to reform than to punish them. Many eminent physicians and chemical manufacturers throughout the country inform me that I have rendered a service to the public by exposing the extremely wicked conduct of these people. If I have in addition done good to the wrong-doers my satisfaction will be complete.

WILLIAM A. HAMMOND.



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Leucorrhœa AND ALL Vaginal Discharges.

EACH TABLET REPRESENTS

Ex. Helonias $\frac{1}{2}$ gr.
Acid Tannic 2 gr.
Acid Salicylic 1 gr.
Ex. Opium $\frac{1}{4}$ gr.
Acid Boracic 3 gr.
Ex. Hyoscyamus 1 gr.
With Thymol, Eucalyptol and Alum.

A simple and efficacious method of treatment that does away with the uncertainty of medicated vaginal injections.

DIRECTIONS—One or two to be inserted into the Vagina each night, followed by a warm water douche in the morning.

Put up in Elegant Shape for Physicians' Prescriptions only.

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GENTLEMEN—I have practiced medicine quite a number of years, but I have never used a remedy that acted with such marvelous effects for good as your "HELONIA TABLETS." Leucorrhœa vanishes like magic. I am Yours truly,

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I have no hesitation in recommending the Tablets to the profession. They are easily handled, elegantly prepared, and will rapidly take an important place in gynecological therapeutics.

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My experience in these cases, with the Helonia Tablets, has been so highly gratifying, and the ordinary astringent injections are at times so unsatisfactory, that I intend to keep a stock of the Tablets on hand and prescribe them in all cases where indicated.

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My experience has been so highly satisfactory that these tablets form a part of my daily armamentarium and I would not be without them at any cost.

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a pleasant and effective liquid laxative has long existed—a laxative that would be entirely safe for physicians to prescribe for patients of all ages—even the very young, the very old, the pregnant woman, and the invalid—such a laxative as the physician could sanction for family use because its constituents were known to the profession and the remedy itself had been proven to be prompt and reliable in its action, as well as pleasant to administer and never followed by the slightest debilitation. After a careful study of the means to be employed to produce such

A Perfect Laxative

the California Fig Syrup Company manufactured, from the juice of True Alexandria Senna and an excellent combination of car-

minative aromatics with pure white sugar, the laxative which is now so well and favorably known under the trade name of "Syrup of Figs." With the exceptional facilities, resulting from long experience and entire devotion to the one purpose of making our product unequalled, this demand for the perfect laxative

is met by Our Method

of extracting the laxative properties of Senna without retaining the griping principle found in all other preparations or combinations of this drug. This method is known only to us, and all efforts to produce cheap imitations or substitutes may result in injury to a physician's reputation, and will give dissatisfaction to the patient; hence, we trust that when physicians recommend or prescribe "Syrup of Figs" (Syr. Fici Cal.) they will not permit any substitution. The name "Syrup of Figs" was given to this laxative, not because in the process

of Manufacturing

a few figs are used, but to distinguish it from all other laxatives, and the United States Courts have decided that we have the exclusive right to apply this name to a laxative medicine. The dose of

"SYRUP OF FIGS"

as a laxative is one or two teaspoonfuls given preferably before breakfast or at bed time. From one-half to one tablespoonful acts as a purgative, and may be repeated in six hours if necessary.

"Syrup of Figs" is never sold in bulk. It is put up in two sizes to retail at fifty cents and \$1.00 per bottle, and the name "Syrup of Figs" as well as the name of the California Fig Syrup Company is printed on the wrappers and labels of every bottle.

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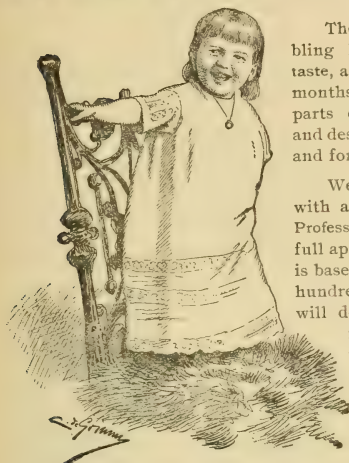
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The former is an all-milk Food, closely resembling human milk in character, composition and taste, and designed for infants from birth to seven months of age, and the latter is composed of equal parts of Lacto-Preparata and Dextrinated Wheat, and designed for the remainder of the nursing period and for Invalids.

We make the statement at the head of this page with a knowledge of the general opinion of the Profession in reference to artificial feeding, and a full appreciation of what our statement implies. It is based on personal observation and actual test in hundreds of cases, and we hope that no Physician will doubt this statement without verifying it by making a trial of our Infant Foods as now put up in hermetically sealed cans

Samples will be furnished gratuitous if you desire to make a comparative test.

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Or Kumyss in powder form for making Liquid Kumyss in less than one minute, by simply dissolving the powder in water.

More nutritious and more palatable than any Liquid Kumyss.

There is no Food that equals it in all forms of Indigestion, Pulmonary Affections, Fevers, Vomiting in Pregnancy, Cancer of the Stomach and all conditions of the digestive organs where no food or even water can be retained. In Phthisis, witill increase weight and strength far more rapidly than

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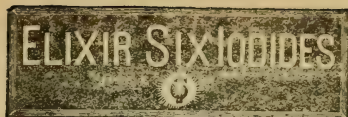
KUMYSGEN is incomparable as a Food where easy digestion, high nutrition and palatability are desired.

A pound bottle of **KUMYSGEN** will be sent any Physician prepaid on receipt of fifty cents, which is about one-third its retail price. **KUMYSGEN** is now put up only in bottles holding 20 ounces and 5 pounds.

KUMYSGEN is much less expensive than ordinary Liquid Kumyss to prescribe and its keeping qualities are perfect, while the latter spoils in a very short time.

***KUMYSGEN**, when first prepared, was not relished by some patients, but, as improved, commencing with batch 200, it will please the most delicate palate

REED & CARNRICK, New York.



This Elixir is prepared from the Chemically Pure Salts. Results can be looked for from its administration that could not possibly be expected from the Commercial.

FORMULA.

Each fluid drachm contains:

Arsenical Iodidum 1-15 grain, Ferri Iodidum 1-12 grain, Hydragryri Iodidum 1-125 grain, Manganasil Iodidum 1-10 grain, Potassil Iodidum one grain, Sodil Iodidum one grain, with Aromatics.

MEDICAL PROPERTIES.

The greatest value of this combination is, that it often relieves those obscure and chronic obstructions to gland action, whether of the great glands as the kidney, liver, pancreas, or of the lymphatic system, which may exert a great influence for evil on the economy. It seems to continuously increase its gain of confidence of the Medical Profession, as its use is indicated in a wide range of diseases, particularly so in pernicious anemia, many forms of skin diseases, both scaly and papular, has remarkable curative effects in specific diseases and other manifestations of systemic infection in females suffering from chronic uterine and pelvic diseases, and in all kindred complaints, where an alterative and tonic is indicated.

It is the combination which is so remedial, proving that the united action of remedies is often requisite to success when either alone is insufficient.



The Hypophosphites are as much of a FOOD as a MEDICINE for the Nervous System. Unequaled as a Reconstructive Remedy. Only the Chemically Pure Salts enter into its combination.

FORMULA.

Each fluid ounce contains:

Hypophosphite Iron 2 grains, Hypophosphite Lime 2 grains, Hypophosphite Manganese 1 grain, Hypophosphite Potassium 2 grains, Hypophosphite of Quinine 1 grain, Hypophosphite Strychnine 1-16 grain.

MEDICAL PROPERTIES.

This is one of the few happy combinations, of whose therapeutic value the Physician has always been convinced. The ELIXIR OF SIX HYPOPHOSPHITES is not only made from chemically pure salts, but is pleasant and agreeable to the taste, and is most reliable and efficient in its action. This remedy has had a high reputation in Scrofulous Diseases and Defective Nutrition of the Nervous Centers, furnishing Phosphorus to the Tissues, thus acting as a Nervous Stimulant. As a Nutrient and Restorative in Pulmonary Consumption, Bronchitis, Asthma, Dyspepsia, Nervous Exhaustion, General Debility and Chronic Wasting Diseases, it cannot be overestimated, and for the restoration of feeble and exhausted constitutions, whether occurring in infancy or old age, is invaluable.



Is prepared not from the commercial, but from the chemically Pure Salts.

FORMULA.

Each fluid drachm contains: Bromide Potassium 5 grains, Bromide Sodium 5 grains, Bromide Ammonium 3 grains, Bromide Calcium 15 grain, Bromide Lithium 1/2 grain, Bromide Iron 1/2 grain with Aromatics.

MEDICAL PROPERTIES.

This preparation is entitled to rank as one of the most valuable therapeutical agents in quieting non-inflammatory excitement of the Reflex Centers of the Cord, of the Peripheral Afferent Nerves, of the Genital Function, and of the Cerebrum. It is particularly valuable in Epilepsy, nearly always effecting a permanent cure where the cause is idiopathic, and the patient follows up the treatment closely. In many forms of Puerperal, Infantile and Hysterical Convulsions, the most happy results follow its use. The ELIXIR SIX BROMIDES can not be overrated in relieving Nervous Headache, Sleeplessness, Neurasthenia, General Nervous Irritation, and the various Functional Disorders. As a direct means of diminishing the frequency of Seminal Emissions it is of great service. We claim that the ELIXIR SIX BROMIDES, is much less depressant to the circulation than if a lesser number of the Bromides were administered, also the Iron it contains gives it the great advantage of not being followed—even if its use is LONG CONTINUED—by the SEVERE ANEMIA that so often follow the use of the Bromides given alone.



A PURE LAXATIVE made from the fresh-selected Drugs. Suitable for all ages and conditions in Removing Constipation.

FORMULA.

Each fluid ounce (with Aromatics) contains: Rhamni Purshiani Cortex (Casara Sagrada) grs. xxx, Podophyllum Peltatum (May-Apple) grs. xxx, Taraxacum Officinale (Dandelion) grs. xxx, Juglans Cineræa (Butternut) grs. xxx, Cassia Acutifolia (Alexandria Senna) one drachm, Potassil or Sodil Tartar, (Rochelle Salt) one drachm

There are few disorders that cause so much mischief as CONSTIPATION. The ELIXIR SIX APERIENTS is recommended as a pleasant, efficient and trustworthy remedy for obstinate constipation of the Bowels and the Diseases which attend it, as Headache, Flatulence, Fies, Liver, Stomach, Intestinal and Uterine Troubles, and the many other ailments which the physician can trace to FÆCAL RETENTION. Amongst the many advantages this Elixir has, it does not tend to leave the Bowels in a confined state, but strengthens the Muscular Fibres of the Intestines, thereby producing permanent benefit upon the Peristaltic Action of the Bowels. The tendency to griping and nausea produced by the ordinary Cathartic is overcome by this elegant Pharmaceutical Preparation which MOVES THE BOWELS GENTLY WITHOUT PAIN OR OTHER INCONVENIENCE. We attribute its mild and efficient action on the Bowels to the combination of the Six well-selected Laxatives.

Physicians when prescribing will please write:
RELEXIR SIX original bottle—(Walker-Green's) Druggists will please write directions on their own labels.
 A full size bottle of either Elixir will be sent to any Physician by express prepaid on receipt of \$1.00.
 Wholesale Price Per Dozen, Iodides, \$8; Hypophosphite, \$6; Bromides, \$6; Aperients, \$4.

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Dr. G. THIN (British Medical Journal. vol. ii, 1891, page 91) states that the consumption of water containing lime brings about the development of gouty conditions; no doubt it acts in the same way as the contamination of the water by lead.

2. Because it contains Iron in combination with the alkalies, Sodium and Potassium in small quantities, as recommended by Profs. Flint, Thomson, Draper and others.
3. Because it comes from a region free from malarial germs.
4. Because all its mineral salts, and five of them in the exact form given in its analysis, are found in the human blood, of which they form a most essential part.

Analysis.—Each gallon contains :

Carbonate of Iron	1,100 grs.
Oxide of Iron.....	0,310 "
Chloride of Sodium.....	1,000 "
Sulphate of Soda and Potash	0,310 "
Carbonate of Soda and Potash.....	0,831 "
Carbonate of Magnesia	1,230 "
	4,781 "

HIGHLAND WATER is sold in glass only, and every bottle has our registered trade mark (two crossed arrows) on both cork and label. It may be obtained from Grocers and Druggists generally, or from the

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It can be combined with Hydrarg. Bichloridum without precipitation or chemical change.

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It is a valuable adjuvant in the treatment of the Syphilitic Cachexia, Tubercular Conditions, and those diseases in which Alternatives are positively indicated. Each ounce contains seventy-two (72) grains of the salt.

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WINEGLASS
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THREE TIMES A
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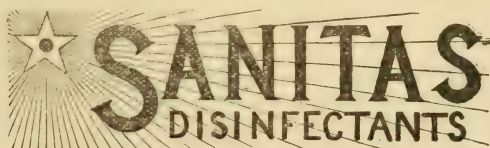
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An Aqueous Extract of Air Oxidised Terpene. Its active principles include Soluble Camphor ($C_{10}H_{16}O_3$) Peroxide of Hydrogen and Thymol.

Invaluable to the Physician for internal or external application.

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Iodinated Wine (Nourry) is a preparation in which Iodine is really combined with Tannin. Its richness in Iodine, its pleasant flavor, its stability, and (on account of the action of the Tannin) its being so perfectly well supported by the most delicate stomachs and so easy of assimilation render it the most effective and agreeable form in which Iodine can be administered. The Iodinated Wine (Nourry) would therefore suggest itself for

Use whenever Iodine is indicated

It has been found superior to Cod Liver Oil, especially in children's maladies. It is recommended in phthisis, la grippe, anaemia, rheumatism, bronchitis, asthma, emphysema and chronic catarrh by such eminent French physicians as Drs. Dujardin-Beaumetz, Féréol, Huchard, de Saint-Germain, Simon, Sevestre, Gibert, Moizard and Abadie.

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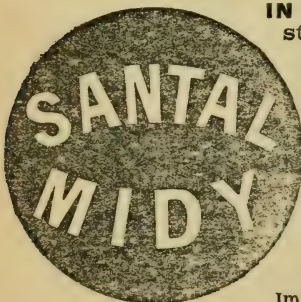
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In Dysmenorrhœa, (congestive and spasmodic) amenable to internal remedies, the suppressed, irregular or painful menstruation is promptly relieved.



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FOR FATIGUE OF MIND OR BODY.

—Made from Fresh Coca Leaves and the Purest Wine.—

RECOMMENDED FOR

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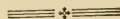
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COCA WINE is probably the most valuable Tonic in the Materia Medica, when properly prepared. With stimulating and anodyne properties combined, Metcalf's Coca Wine acts without debilitating, being always uniform and therefore absolutely reliable. For Athletes it is invaluable in imparting energy and resisting fatigue; Public Speakers and Singers find it indispensable as a "Voice Tonic," because, being a "tensor" of the vocal chords, it greatly strengthens and increases the volume of the voice; and to the elderly it is a dependable aphrodisiac, superior to any other drug.

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Theodore Metcalf Co.

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HORSFORD'S ACID PHOSPHATE.

Recommended as a restorative in all cases where the nervous system has been reduced below the normal standard, by overwork, as found in brain-workers, professional men, teachers, students, etc., in debility from seminal losses, dyspepsia of nervous origin, insomnia where the nervous system suffers.

It is readily assimilated and promotes digestion.

Dr. Edwin F. Vose, Portland, Me., says: "I have prescribed it for many of the various forms of nervous debility, and it has never failed to do good."

Send for descriptive circular. Physicians who wish to test it will be furnished, upon application, with a sample, by mail, or a full size bottle without expense, except express charges.

Prepared under the direction of Prof. E. N. HORSFORD, by the

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ONE TABLET
AFTER EACH MEAL &
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Exercises a specific alterative action on the uterine tissues, a general tonic influence on the Pelvic Organs; has a tendency to absorb plastic deposits, to regulate the vascular supply, to relieve congestion, to tone up the nerve forces, to encourage peristalsis of the bowels, and to remove spasmodic conditions.

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The scale marked with black ink and everlasting.

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The welding the two bulbs into one without any intervening space renders "THE TWIN" much stronger and less liable to break than any other heretofore offered.

It will also be found much more convenient to carry, requiring less room in a case or in the vest pocket. For these reasons as well as for its Guaranteed Accuracy, "THE TWIN" is universally recommended by the medical profession. **For Sale by all Dealers. Price \$2.00 Each.**

For a limited time sent by mail to physicians at 25 per cent. discount; that is upon receipt of \$1.50 net, provided they are careful to mention this Magazine.

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BAKER'S EMULSION

is prepared from the finest Cod Liver Oil in the world, and can be prescribed with assurance of the most satisfactory results.

Palatable. Bottles contain full 16 ounces.

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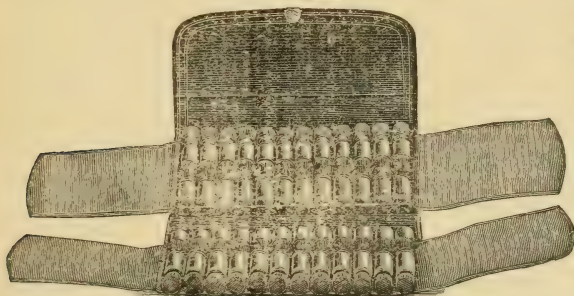
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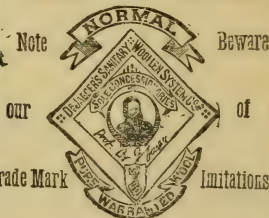
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Many persons have fair health during the cooler months of the year, yet suffer greatly from debility during the long, hot summer. The relaxing effects of the heat itself, besides the loss of the salts of the tissues, through the excessive colliquative perspiration, prove exceedingly depressing to the vital powers. Not only is this condition of extreme debility very depressing in itself, but it also predisposes the victims to attacks of disease which they would otherwise be able to resist. Thus, towards the latter part of the heated term, we have a long list of protracted, exhaustive fevers, for the fatal issue of which the extreme debility of the patients is largely responsible.

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No. 4.

Original Communications.

Nasal Polypus (Myxoma), with Report of a Case.

By W. H. WAKEFIELD, M. D., Salem, N. C.

Nasal polypus is a form of growth met with more frequently in the nasal passages than any other form of neoplasm. Histologically it consists of hypertrophied mucus membrane structures, peculiar to the point from which it springs, viz: glandular structures, connective tissue, vessels and epithelial covering. Considerable variation in density is observed in these polyps, some being quite firm to the touch, and bleeding but little when cut or torn; others are jelly-like, offering little resistance to the probe, and bleed quite freely. (The bulk of the latter tumor is made up of a gelatinous intercellular substance, consisting very largely of mucus.—Bosworth, Nose and Throat, page 388.)

They usually spring from the lower edge or inner side of the middle turbinate body, but they may be found attached to any of the turbinates, the outer wall or the roof of the nasal cavity. Their points of attachment may be small, like that of a pair or an apple to its trig (pediculated), or they may be broad (sessile). In appearance nasal polyps are grayish, or grayish blue, and glistening, "not unlike the pulp of a grape." They occur either singly or in groups, in one or both nostrils, and not infrequently are observed in the naso-pharynx. No age is exempt from the possibility of their development, although they occur most frequently between 20 and 30. Authorities do not agree regarding the etiology of nasal polyps. I have observed them more frequently in persons of robust health than in the weak and debilitated, hence I infer that they are not due to a diathesis or impaired health.

Sajous says (Diseases of Nose and Throat, 1890. page 137): "Mucus polypi are generally considered to be due to a chronic inflammation of the schneiderian mucus membrane. Intra-nasal

pressure, owing to narrowness of the cavities or to a deviated septum, seems to favor their formation. No underlying dyscrasiæ, syphilitic or scrofulous, seems to influence their growth."

Rumbold states (Diseases of Nose and Throat, 1888, page 174), that these growths are always the result of chronic inflammation.

I quote at some length from Bosworth (Nose and Throat, 1889, Vol. I, page 392): "I am disposed to think that the most rational explanation of the development of these growths is in the fact that the mucus membrane covering the middle turbinated bone is of very soft, delicate consistency, and is actively concerned in the respiratory function of the nose, viz: serous exosmosis, and that as a serous transudation, the membrane becomes saturated or water-soaked, as it were, in such a manner as to lead to the development of this peculiar myxomatous condition. As to what peculiar nutritive disturbance in the meshes of this tissue predisposes to this form of degeneration, I have no suggestion to make."

From this quotation we learn that Bosworth does not favor the inflammation theory, but my own experience inclines me to the opinion that chronic inflammation with acute exacerbations exercises considerable influence as a causative factor, as the majority, if not all, of my patients suffering from nasal polypus, give a history of repeated colds in the head. The distress caused by the presence of these tumors varies according to their position, number and size, and the susceptibility of the sufferer. In some patients an itching, burning sensation about the bridge of the nose causes attacks of sneezing, accompanied by considerable discharge of a thin fluid; in others there is severe headache; while in others the chief complaint is of a more or less complete nasal stenosis.

The successful treatment of nasal polypi depends upon their complete removal. Rumbold mentions a case in which mild, alkaline sprays caused a disappearance of the polypi, but I have not been so fortunate. Local applications at my hands of mild agents have been without any appreciable results, so far as removing the growth is concerned. The application of stronger agents, caustics and acids is certainly more painful and dangerous than the snare, besides prolonging the treatment. However, "every case is a law unto itself," and should be carefully studied and those means used in treatment which promise the best result. It is not improbable that in some cases the destruction of the polyps *in situ* may be

preferred to an attempt at removal by surgical means. Owing to the location, shape and size of the tumor, and often skittishness of the patient, the operator's ingenuity is often taxed to the utmost to devise the best means, or in fact, any means, that will remove the growth without injury to the surrounding parts. I rely mainly on the cold wire snare forceps, and when the neoplasm extends into the naso-pharynx, my index finger.

However, these growths are generally easily and almost painlessly removed by means of the snare, the nasal cavity having previously been sprayed with a 4 or 5 per cent. of cocaine. If, on the removal of the polypus, its stump is found to project beyond the adjacent mucus membrane, cauterization of this stump should be practiced. The destruction of tissue should be limited to the stump, as near as possible, and it should be destroyed below the level of the mucus membrane around it. This renders the return of the polyps less liable, but actual cautery or acids should not be used when the location of the supposed stump has to be "guessed at," as, under such circumstances, injury to the healthy tissues is certain, while beneficial results are extremely doubtful.

A recent issue of the N. Y. Medical Journal, August 5th, 1893, contains a report of an interesting case of nasal polypus, extending into the naso-pharynx. The size of the tumor, $2 \times \frac{3}{4}$ inches, is spoken of as unusual. A "more aggravated" case occurred in my practice a few months ago, and as such cases are uncommon I think it not unworthy to be reported.

REPORT OF CASE.

Mr. A., age 44, farmer, consulted me in April, 1893, on the advice of his family physician, Dr. Eller, of Moravian Falls. He states that about 18 years ago some growths were removed from his nose; also that the doctor told him "he could not remove them all." For a few weeks he felt better, nasal respiration was possible, but in less than six months he was as bad as before the operation. For sixteen years he has been unable to breath through his nose. His voice has that peculiar quality imparted to it by the lack of nasal tone.

On anterior inspection grayish masses were found crowding the vestibule and filling the nasal passages until it was impossible for the patient to force any air through the nose. By means of re-

flected light and the mirror, a clear view was obtained of a similarly colored growth apparently filling the naso-pharynx, but not extending into the pharynx sufficiently far to render it visible without the aid of the rhinoscopic mirror. There were many polyps in each nostril, wedging and crowding each other until it was impossible to follow any one of them to its point of origin. By means of Bosworth's snare considerable portions of the masses in the nostrils were removed, but they were wedged together in such a manner that, for their complete removal, the alligator forceps was used. When the nostrils were thoroughly cleared of the polyps it was found that the polypus in the naso-pharynx rendered expiration through the nose impossible and seriously interfered with inspiration. This growth was easily detached by means of the index finger passed behind the soft palate, and nasal respiration rendered possible. Owing to the constant oozing of blood from the middle turbinates, its point of attachment could not be definitely located, but from the position of its pedicle I suspect its origin was the posterior border of middle turbinate body in left nostril. This polypus was the largest I have seen. Its shape was quadrilateral, and it measured $1\frac{3}{4}$ by $1\frac{1}{4}$ inches, while its thickness ranged from three-eighth inch at the edges to five-eighth inch at the middle.

The patient's nose was large but not deformed externally; the inferior turbinate bodies were shrunk to mere ridges, this change, no doubt, being caused by pressure. Since the removal of these polypi, his physician informs me, the patient has gained fifteen pounds in weight and his strength has increased.

Sufficient time has not yet elapsed to exclude the probability of a return of any of these polyps, nor have I had an opportunity to examine the patient.

Bosworth, in his excellent work on the nose and naso-pharynx, says: "The patient should be seen weekly until an inspection shows a cavity entirely free from polypi, after which the patient should be seen once a month for four or five months, at which time a radical cure, in the large majority of cases, can be assured." In the "old North State" the majority of cases would not turn up for weekly or monthly examinations, and if a radical cure depends on the faithful carrying out of this ideal treatment, we cannot be surprised that so many physicians report recurrent growths in cases of nasal polypi.

The Erectile Tissues—Their Physiology, Pathology, and Treatment.

BY J. J. CALDWELL, M. D., 1110 N. FULTON AVENUE, BALTIMORE, MD.

There are certain parts of the body, male and female, which, when excited, become swollen and turgid with blood and firm to the touch. The sensibilities, and indeed all of the actions of such parts appear exalted when in a state of erection. The most peculiar phenomenon in this state is the sudden and remarkable accumulation of blood in the erectile tissue at the time and as the immediate cause of the erection.

This action was formerly explained by the existence of a certain force peculiar to erectile tissue called "nervi-erigentes;" but the researches of later physiologists have discovered a peculiar mechanism in the tissue itself, by means of which the elongation is produced, viz: it depends upon pressure exercised on the veins or sinuses of the tissue by certain bands of muscular fibres; and hence the accumulation of blood as the arteries convey it freely and rapidly to the tissues. These muscular bands are supplied by nerves in much the same way as the vessels from centers located in the spinal cord, and are often called the "nervi-erigentes." But no matter whether the congestion is produced by the action of the vaso-dilator or the vaso-motor apparatus, or by direct or indirect action on the muscular apparatus of the erectile tissue, we must in any case refer any influence transmitted to the parts in question to the spinal cord. This leads us back to a genito-spinal center in the cord, vaso-motor, but as we have seen before, no nervous center can act of its own motion, or originate action *de novo*, they must be excited to action. This being so we must look about for a suitable excitant influence to act upon the vessels so as to cause, in one way or the other, congestion. For a long time it has been regarded as probable that the spinal cord has a direct influence on the organs of generation; but it was Budge who made the definite experimental observation in regard to the influence of the lower part of the spinal cord on the motions of the generative organs. He laid bare the spinal cord in a male rabbit and at the same time exposed the testicle, the *vas deferens* and seminal vessel of one side. By irritating the exposed lumbar portions of the cord he found in numerous experiments that irritation of that part which

corresponds to the fourth lumbar nerve produced active motions in the *vas deferens* and seminal vessels, the motion beginning at the testicle and being propagated toward the corresponding seminal vessels. The irritation on no other part of the cord produced such effects. These observations on the male, which have been often repeated with the same results, have also been made on the female; and movements of the uterus have been excited from corresponding points of the cord, therefore, the development and escape of the seminal fluid and graafian vesicle are attended with no small degree of nervous excitement. Actuated from the same spinal center, both male and female, organs of generation become more and more congested and irritable as these phenomena increase, so that every impression, even every influence affecting these parts must be reflected to and from the spinal cord, from these to the brain and to the external genitals; hence we may readily perceive the relations existing between potency and the vaso-motor tonus of the genito-spinal centers, or impotency and the plexuses of these centers. In the latter case there could be no erection or there would be a great loss of the fluctuating powers of the genital organs, i. e., enfeeblement of secretions, erections and ejaculations of the male and a want of activity and ovulation and menstruation on the part of the female. Hence, all of the procreative powers are more or less dependent upon the aforesaid vaso-motors. The inhibitory action exerted by these sensory centers throughout the cord play a vitally important influence over the circulation, viz: periodical and rhythmical action of the heart and respiration, blushing, rage, pallor, and suffusion. Says John Hunter: "There is not a natural action of the body, whether voluntary or involuntary that may not be influenced by the peculiar state of mind at the time."

Impotency in man may be caused by absence, want of development, malformation, or mutilation of the penis; by mental influence, any violent emotion operating protractedly or during coition, as want of confidence, fear of consequences, anxiety, grief, disgust, over excited desire.

By fevers and other severe diseases, the sexual organs remaining feeble after general health is restored. By injuries to the back part of the head from falls, blows, concussion, etc.; these being generally incurable, loss of power and wasting of testes and penis follow. By injuries and diseases of the spinal cord, which remove

the power to copulate though desire remains and semen may be secreted. By excessive use of tobacco, which impairs digestion, and weakens nervous and muscular systems. Opium eating is injurious in like manner and from the same cause. By abuse of the sexual functions, removing the power of erection. Onanism or excessive sequal intercourse. Spermatorrhœa. Impediments to escape of semen, such as stricture of urethra in which the ejaculated fluid regurgitates into the bladder. Abnormal openings in the urethra (hypospadias and epispadias) so that the semen is not ejaculated into the vagina. By excessive obesity and large scrotal hernia.

Impotence in women may be due to firm adhesions of the *labia pudendi*; excessively developed and persistent hymen; absence, malformation, or an impervious condition of the vagina; obliteration of this canal through inflammation. A double vagina impedes but does not prevent copulation. Super-sensitiveness with spasmodic closure of the vagina (vaginismus). Tumor of the vagina, or uterine tumors which have passed into the vaginal canal. Elongation of the cervix uteri; engorgement or induration of *labii uteri*; obliteration, obstruction, or great narrowing of os uteri or cervical canal. Closure of uterine cavity by tumors, cancers, etc. Malposition of the uterus. Acute retro-flexion and ante-flexion. Inflammation affecting the uterus. Occlusion of the fallopian tubes, disease of fimbriated extremities. Irremediable procidentia of the uterus. Large recto-vaginal or vesico-vaginal fistula, or complete rupture of perineum allowing improper escape of seminal fluid. Uterine cancer, even when the vagina is involved, impedes but does not prevent intercourse and fecundation.

Sterility in man arises from certain diseases, such as tuberculosis, diabetes, albuminuria, some forms of obstinate dyspepsia; in advanced stages the secretion of seminal fluid is usually stopped. Some cerebral defect, owing to which the functions of the testicles have never been called into play. Disease of testicles, tumors, cancers, repeated attacks of varicocele, though as only one gland is usually affected, these conditions scarcely produce sterility. Malposition of testes, these organs being retained in the abdominal cavity copulation being feasible with the cryptorchis, but the semen ejaculated being destitute of spermatozoa. Obstructions in the excretory ducts of the testicles; such as temporary or permanent ob-

struction after epididymitis, with power of copulating, but ejaculated fluid being destitute of spermatozoa. Obliteration of ejaculatory canals from abscesses near prostate leading to atrophy of the testes. Abuse of tobacco, opium, and alcoholic drinks, and syphilitic taint as well, may destroy vitality of spermatozoa.

Sterility in women arises from amenorrhœa; from exhaustion or excessive general weakness; too frequent or imperfect sexual excitement, and those versions, displacements, congestions, hysterias, paralyses, tumors, which are the prolific results of masturbation. Absence, arrest of development, or disease of ovaries, only occasional, not absolute cause, as both glands are seldom diseased at the same time. Leucorrhœa, especially when the discharge is abundant and acrid, by causing destruction of the spermatozoa before they reach the ovule. Syphilitic taint occasionally destroys vitality of ovule. In the absence of all obstructions or indications of disease, with apparent perfect moral and physical adaptability, there are cases of sterility still existent, regrettable and baffling, which if not irremediable, their hope and succor rests solely in the studious skill of the neurologist. How momentous a medico-legal precaution may be the services of such an expert in family imbroglios, dubious and unjust dismemberments of estates, prevented litigations depending upon the want of that 'glory'—an heir—is attested frequently by memorable and gratifying solutions.

TREATMENT.

While these tissues in their pathologic state may demand sanatory means and applications as comprehensive as sexual neurasthenia, with its mental hygiene electro-theraputy, baths, massage, counter-irritants, and the like, along with the well known older remedies, I include as valuable and reliable, for the actions they are sought to produce, the following remedies: Damiana, yerba santa, saw palmetto, liquor sedans. vanilla, black haw, pichi, stylosanthus elatior.

A few cases may illustrate and break the monotony of more general assertion.

CASE 28—*Persistent Spermatorrhœa*.—Mr. H., of North Carolina, aged 30, married several years without issue owing to his persistent spermatorrhœa, which incapacitated the full act of copulation and deteriorated the vitality of his semen. Upon presentation

I found that his urethra along the whole canal was very irritable, particularly so along the prostatic portion; that the organ was continually weeping spermatic and prostatic fluid, and that he suffered ejection during the slightest irritation, mentally and physically, and that he was melancholy and foreboding, and that his skin was cold, clammy and sallow. His general health was very much broken. He had married with the hope of benefitting these unhappy symptoms; but this was a great mistake—one that is made by many laboring under like conditions. Instead of marriage, such parties should seek as a remedy the advice and treatment of the intelligent, scientific physician—one honest and reliable, making these cases a special study. Unfortunately for the community, the advertising quacks have had the majority of these delicate and all-important cases as their greatest source of revenue. Upon passing the sound I found the urethra very tender, with a spasmodic stricture located at or near the prostatic gland. The passage of the sound was continued twice a week to dilate the urethra and to lessen its irritability. During the emission of semen, and just previous to that act, he observed a peculiar sensation or warning similar to the aura of epilepsy. Hence I placed him upon the bromides and atropine at night, and administered the nitroglycerine pills ($\frac{1}{60}$ gr. each), one three times a day, and ordered warm baths and careful diet. The effect of this treatment was to arrest his trouble and to gradually restore him to physical and mental health. After this treatment had been continued for several months, I placed him upon tonic treatment, consisting of the fluid extract of damiana, belladonna, nux vomica and tincture of cinchona compound, with occasional applications of electricity to the spine. This, together with a select diet, added greatly to his vigor and procreative powers. All unnatural discharges have long since ceased with a fair promise of being blessed with offspring, his wife being several months advanced in pregnancy.

The number of such cases throughout the land is legion, and ever will be until our communities are taught to value scientific and special treatment.

CASE 13—*Neurasthenia*.—Mr. D., a young gentleman, aged 25, a student at law, who also performed the duties of a clerk in an office controlling a large practice. His studies and duties proved

too arduous an undertaking, and soon broke him down mentally and physically, being of a nervous and ambitious disposition. He suffered greatly from nervous dyspepsia and general nervous exhaustion. He lost flesh, lost sleep, and was tremulous and depressed, and suffered frequent seminal losses night and day. Upon examining the urethra, it was found to be irritable, with a continuous weeping discharge. No stricture was found. The penis was small, flabby and cold. I ordered him a vacation and administered atropine with bromides until the nervous irritation had subsided. I then gave a tonic consisting of liquor sedans and saw palmetto during the day, with doses of pichi and hyoseyamus at bedtime, as required, making applications of the Faradic current locally and generally every few days. This treatment was kept up during the summer vacation, until late in the autumn, when he returned to his vocation, generally better and greatly restored in his nervous system. With better sleep, good appetite, and genital functions normal, the use of electricity was continued a term longer when he left my care, with the advice to be more moderate in all things.

CASE 144—*Neurosis of Genitalia with Nervous Paralysis.*—Mr. K., aged 33, was referred to me because of suffering from general nervous prostration. He is tall, athletic and active; he had lately lost his color and vivacity; and had acquired an unaccountable dread of persons and places. He was almost a monomaniac in the fear of on-coming "loss of manhood," or paralysis of his procreative powers. Upon examination I found it was his custom to endure prolonged and arduous mental work, neglecting the regularity of sleep, diet and recreation. He had a fine constitution and physical development. His genito-urinary organs were intact and well developed, and proved readily amenable to treatment by proper hygiene, occasional administrations of electricity, and a tonic consisting of coca, sandal and vanilla. A few months of such treatment fully restored him in every particular. His physician deemed his mental phenomena of an abnormal and perhaps dangerous character, hence he referred him to me. All his unpleasant symptoms passed away as he gradually improved, though such a case neglected long enough undoubtedly might have ended in some permanent pathological lesion.

CASE 66—*Impotency Due to Excessive Use of Tobacco.*—Mr. G.,

aged 31, married, was referred to me as a case of impotency. I found him a hale man, well developed mentally and physically. His muscles were hard and elastic, and he was able to endure great physical strain. All of his organs were well developed—especially those of the genito-urinary system. After a thorough inquiry, I found that he was excessive in the use of tobacco, chewing and smoking to an alarming extent, and at times was in the habit of taking alcoholic liquors too freely, all of which I forbade. I ordered for him a moderate diet and pills of damiana and nux vomica; also the daily application of the Faradic stimulus to the cord and genito-urinary appendages. He was to abstain from all genital exercises. He continued under treatment for several months, with most excellent results.

Tobacco and whisky are, in my opinion, frequent inhibitors of the sexual act.

CASE 92—*Inertia of Uterus*.—A young married lady, aged 22, from a fright or shock, suffered abortion during her first pregnancy. After this her menses were scant and irregular, with failing health for several years. She did not become pregnant during this time. She and her husband were anxious for an heir, as an estate depended on the issue, aside from the natural desire of maternity. After a careful examination, I diagnosed a neurasthenic condition with consequent inertia of the genito-urinary organs. I ordered generous diet and hygiene, gentle exercise, and administered fluid extracts of Damiana and Haw three or four times daily, commencing with small doses and gradually increasing. After a few months the menses became more regular and pronounced. With general improvement of health and spirits, at the end of the third month of treatment she became enciente, and went through a regular term with a happy delivery.

CASE 163—*Impotency*.—A gentleman of 36 years, of delicate frame, constantly complained of feeble digestion, irregular bowels and constipation. His complexion is sallow, he sleeps badly, his habits are sedentary, and he is given to literary affairs. Has been married several years without issue. His wife is buxom, active and regular. Upon examination I found his organs rather small, with the power of incomplete erection only. His semen under the glass exhibited but few evidences of life. I ordered a more active life, less study, regular hours and diet. Placed him on fluid ex-

tracts of Damiana and Stylosanthus, and after six months careful management he was greatly restored. He reports his wife in a fair way to become a mother.

In cases of impotence from masturbation, accompanied by spermatorrhœa, we find morbid changes in the vesicular seminales, ejaculatory ducts, bulbous portion of the urethra and prostate gland. Such cases frequently require surgical and special treatment; and in detecting and locating these lesions I have found nothing equal to photographing them by the sound in the galvanic connection, as introduced.

The Height of Man.

A French statistician has been studying the average heights of men at different periods of the world's history and has reached some alarming conclusions.

The recorded facts extend over nearly three centuries. It is found that in 1610 the average height of men in Europe was nearly 5 feet 6 inches. In 1790 it was 5 feet 6 inches. In 1820 it was 3 feet 5 inches and a fraction. At the present time it is 5 feet $3\frac{3}{4}$ inches. It is easy to deduct from these figures a rate of regular and gradual decline in human stature, and they apply this, working backward and forward, to the past and to the future.

By this calculation it is determined that the stature of the first men attained the surprising average of 16 feet 9 inches. The race had already deteriorated in the days of Og, and Goliath was quite a degenerate offspring of the giants.

Coming down to later time, we find that at the beginning of our era the average height of man was 9 feet, and in the time of Charlemagne it was 8 feet 8 inches.

But the most astonishing result of this man's study comes from the application of the same law of diminution. It is conclusively shown that in 4000 A. D., the height of the average man will be but 15 inches, and in a few thousand years more the end of the world will come, for men will get so short that there will be nothing left of them.—*Buffalo Express*.

Dr. W. C. Wile, editor of the New York Medical Journal, was elected Surgeon General of the Grand Army of the Republic at the recent meeting in Washington.

Observations on the Therapeutic Treatment of Uterine Fibroids.

Dr. Thos. W. Adams offers the following deductions as a result of his observations :

1. That whenever a woman has a myofibroma of the uterus she can be benefited either by operation or treatment.
2. That whenever a woman has a myofibro cystic tumor of the uterus there is only one method of cure and that must be operative.
3. That the elective method of palliation or cure in any given case of myofibroma must be governed by the condition of the patient and the condition and relations of the tumor present.
4. That the elective methods of treatment of myofibromata are palliative, medicinally curative, electricity, operative.
5. That certain cases of myofibromata can be and are benefited and rendered entirely inert by the use of properly selected therapeutic agents.
6. That the class of myofibromata which are benefited by the use of therapeutic agents are those in which the muscular tissue largely predominate.
7. That the class of myo-fibromata, in which the muscular tissue largely predominates, are reduced in size and rendered harmless by the use of salix niger and ergot. That this does not, however, cover every tumor of this class.
8. Finally, in certain cases, the use of therapeutic agents, if not curative, makes an operative interference safe and of more easy performance ; locally by lessening engorgements and loosening adhesions by its contractile effects, and constitutionally by relieving symptoms and thus allowing the attainment of a better general condition.—*Med. and Surg. Reporter.*

Study of the Lines of Fingerprints.

In a recent publication Dr. Galton, who has made himself famous by his study of the lines of the finger print, reports that after fourteen years the finger prints of certain individuals give the same ridges even under a magnifying glass. He says that the Bengal police are in the habit of taking the print of a single finger in order to identify criminals.

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It has Gained a Wide Reputation, particularly in the treatment of Pulmonary Tuberculosis, Chronic Bronchitis, and other affections of the respiratory organs. It has also been employed with much success in various nervous and debilitating diseases.

Its Curative Power is largely attributable to its stimulant, tonic, and nutritive properties, by means of which the energy of the system is recruited.

Its Action is Prompt: it stimulates the appetite and the digestion, it promotes assimilation, and it enters directly into the circulation with the food products.

The prescribed dose produces a feeling of buoyancy, and removes depression and melancholy; *hence the preparation is of great value in the treatment of mental and nervous affections.* From the fact, also, that it exerts a double tonic influence, and produces a healthy flow of the secretions, its use is indicated in a wide range of diseases.

NOTICE -- CAUTION.

The success of Fellow's Syrup of Hypophosphites has tempted certain persons to offer imitations of it for sale. Mr. Fellows, who has examined samples of these, **finds that no two of them are identical**, and that all of them differ from the original in composition, in freedom from acid reaction, in susceptibility to the effects of oxygen when exposed to light or heat, **in the property of retaining the strychnine in solution**, and in the medicinal effects.

As these cheap and inefficient substitutes are frequently dispensed instead of the genuine preparation, physicians are earnestly requested, when prescribing the Syrup, to write "**Syr. Hypophos. Fellows.**"

As a further precaution, it is advisable that the Syrup should be ordered in the original bottles; the distinguishing marks which the bottles (and the wrappers surrounding them) can then be examined, and the genuineness—or otherwise—of the contents thereby proved.

Medical Letters may be addressed to

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Charlotte Medical Journal.

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Articles intended for the Original Department of the Charlotte Medical Journal will be accepted only with the understanding that they are contributed to it exclusively.

THE New York water supply is being purified by electricity. This is a very interesting and scientific fact.

ANOTHER large hospital is soon to be erected in New York, to be called the Grace Hospital. In connection with the hospital will be three supplementary buildings, called the House of Simon, for old men; the House of Anna, for old women; and the House of the Holy Child, for children.

It affords us pleasure to introduce several new contributors to our friends this month. The article entitled "The Erectile Tissues—Their Physiology, Pathology and Treatment," by J. J. Caldwell, of Baltimore, is especially interesting. The Doctor is an eminent specialist and has done a great deal to advance the science of medicine in the past few years.

"A ROSE BETWEEN TWO THORNS."

We should be very thankful for the health our State has so far enjoyed. With cholera ever fighting to gain entrance on the one hand, and yellow fever, with her frightful record, on the other, we are as a rose between the two, affected by neither. Providence has been especially kind to us. We have suffered from the effects of only one plague, and that has been very general—the great financial plague, that has been wandering around the country visiting the homes of the rich as well as the poor. While New York offers her wealth and business as an inducement to live there, and Florida her climate, standing between the two, wishing for a long life and a peaceful death, with neither dread of foe within or foe without, I would say—Give me the Old North State.

THE opening article of this issue, entitled "Nasal Polypus, with Report of a Case," by Dr. W. H. Wakefield, of Salem, N. C., is indeed a fine contribution, and is of sufficient interest to call special attention to it.

CHOLERA AT NEW YORK QUARANTINE.

The recent quarantine law, requiring stationary sanitary inspectors of this Government at foreign ports, has demonstrated its advantages during the past summer. We learn through the New York Medical Journal that Surgeon Fairfax Irwin telegraphed from Marseilles on May 27th that cholera existed in that city, although the authorities then and for some time subsequently denied the fact. On July 19th Assistant Surgeon G. B. Young telegraphed from Naples that there had been four cases of cholera in that city on the 17th of that month. The report was at once denied by the Italian authorities. The information, however, served a good purpose, for on August 4th the steamship *Karmania*, that had cleared from Naples on July 15th, having 471 passengers, arrived at New York quarantine station with a history of the death of one passenger from congestion of the lungs, on the second day out, and the death of two passengers, on August 2 and 3 respectively, of diarrhoea and vomiting.

Although the ship had sailed two days previous to the known occurrence of cholera in Naples, Health Officer Jenkins decided to detain her at lower quarantine for observation. The wisdom of his action was shown by the removal of a passenger suffering from cholera, as demonstrated by bacteriological examination at the Swinburne Island hospital on August 5. On August 8 another cholera patient was taken from the observation barracks on Hoffman Island, and he died on the evening of the 9th. On the latter evening two more patients were transferred; on the 10th five patients; on the 11th, eight patients; on the 12th, one patient, and on the 13th, two patients. There was a total of twenty cholera patients, and three of these died. The passengers under observation were discharged on August 22, nine days after the last cholera case occurred.

Health Officer Jenkins is to be congratulated upon the promptness and efficiency with which he handled this vessel and its passengers, and the public press is to be commended for the manner

in which it avoided alarming head-lines calculated to intimidate many people and produce a senseless stampede such as was witnessed last year.

IN a very interesting and well written article, recently appearing in *The Practitioner*, by Dr. Sampon, on the "Antiseptic Treatment of Typhoid Fever," the Doctor has the following to say for Salol :

"I have been using Salol exclusively in typhoid fever, not so much on the idea of combating the specific poison, but of cleaning and keeping clean the intestinal tract, and so subduing the irritation of the glands of Peyer's patches and other ulcers there, and that caused by the secretion from these ulcers in the intestine. Salol also prevents the excessive formation of wind, which is sometimes such a vexatious trouble to the patient. Salol brings the temperature down generally one or two degrees, causing abundant perspiration (this can be readily combated by giving oxide of zinc, tincture of belladonna, and some quinine in a mixture), reduces the number of stools from twelve or fourteen in the twenty-four hours to three or four, and when they are offensive, deprives them of any odor whatever. No bad effects were noticed with regard to its action in producing delirium. Its use was continued in typhoid fever for about a week after the disappearance of diarrhoea. It was always given in ten-grain doses suspended by means of compound tragacanth powder, at first (in typhoid fever and other complaints) every few hours, then every six, and for the last week three times a day."

The Doctor's views are almost entirely in accord with my own. It is, however, seldom in my practice that I see the necessity of giving over 5 gr. of Salol every two or three hours. There is no longer any doubt about the value of an antiseptic remedy in the treatment of this disease, and there are few practitioners of any note at the present who do not regard Salol as the ideal intestinal disinfectant. In addition to its germicidal properties, it has always been, in my practice, without a single exception, all the antipyretic that was necessary. In fact, it is indeed very seldom, in my opinion, that an antipyretic of any kind is necessary in a properly managed case of this fever. The more experience I have in the treatment of this disease, the stronger my convictions are that the high fever is due more to dietetic errors than it is to the specific poison.

BOOKS REVIEWED.

HOW NATURE CURES, Comprising a New System of Hygiene; also, The Natural Food of Man. The Statement of the Principal Arguments Against the Use of Bread, Cereals, Pulses, Potatoes, and All Other Strict Foods. By EMMET DINSMORE, M.D.

"There is no wealth but life, life, including all its power of love, joy and admiration. That country is the richest which nourishes the greatest number of noble and happy human beings; that man is the richest who, having perfected the functions of his own life to the uttermost, has also the widest helpful influence." The author states that the principal thought on which this book is written is the confident belief that sickness and acute attacks bear the same relation to diet as drunkenness bears to drink. He wishes to impress the fact that nine-tenths of the sickness and ailments common to the human race is due to improper diet, either in quantity or quality. Space will not allow each chapter to be separately dealt with, the three main chapters being How to Doctor; How to Get Well and Keep Well; The Natural Food of Man. Each chapter is considered from a thorough, practical standpoint, telling us what to do and what not to do in everyday life to avoid sickness. Many times sickness might possibly have been prevented if more attention was paid to these practical teachings. The book will be of great use to any who may read it. It will be of special value as a book among the family.

SYSTEM OF DISEASES OF THE EAR, NOSE AND THROAT. Edited by CHAS. BURNETT, A. M., M. D., Emeritus Professor of Otology in the Philadelphia Polyclinic; Clinical Professor of Otology in the Woman's Medical College of Pennsylvania; Aurian Surgeon to the Presbyterian Hospital, etc., Philadelphia, Pa. In two vols. J. B. Lippincott Co.

Scarcely is a reviewer's table ever graced with two more beautiful or handsomer books than those above. After a careful reading of these excellent works, it is clearly seen that the editor has placed before the profession a practical work on the diagnosis and treatment of diseases of the ear, nose, the naso-pharynx, the pharynx and the larynx, composed of papers by eminent authorities upon the various subdivisions named. The author has given practical conclusions arrived at by other investigators and by themselves, rather than to discuss theories. 'Tis true that the general practitioner is not expected to understand as thoroughly the treatment and management of diseases of the ear or nose as that of typhoid fever or pneumonia, but he is expected to be

familiar with the general principles of these diseases, and as for works, for either the specialist or general practitioner, from which to gather information, we know of none that equals the volumes before us. The opening chapter of Vol. 1 is devoted to that difficult subject, the Anatomy and Physiology of the Ear. To this most important subject one hundred pages is devoted, written by the well known William Bryant. Following this is a very interesting chapter by Huntington Ricards, on The Proper Way to Examine Your Patients, the instruments needed and the methods of their employment. Among the many interesting and valuable articles of which I would like to call attention to, I wish to speak particularly of the chapter on Chronic Purulent Otitis Media, by Chas. H. Burnett. The frequency of this disease, its severity and dreaded results calls for most careful and prompt study. In Vol. 2, Diseases of the Nose and Naso-Pharynx and Diseases of the Pharynx and Larynx are considered. The first article is from the pen of Carl Sieler, M. D. Here he considers Morbid Growths and Deformities of the Nasal Cavities, with History of Tumors, their Etiology, Diagnosis, etc. Following this interesting chapter are those written by Jarvis, Bosworth, White, Gould, Bulkley and others who rank equally as high in the profession. As has been before stated, each chapter has been written by a specialist on that subject, and as a matter of course it is the best he could produce, thus bringing together the cream of the facts and knowledge concerning the diseases under consideration. The books are filled with beautiful illustrations, also many colored plates. These are neat and useful books and need only to be examined by doctors to adopt them for their use and guide in time of need. We most cordially recommend them for their completeness, accuracy, and general excellencies for student and practitioner.

THERAPEUTICS OF CHOLERA. By P. C. MAJUMDAR, M. D. Boericke & Tafel, Philadelphia, Pa.

This little book contains about 160 pages, and is well worth reading. The author has had an abundance of experience, having spent 14 years of his labors in the so-called "home of cholera." The author has very wisely left out of consideration the disputed and doubtful questions of various theories as to the etiology of the disease and its pathological speculations. He dwells very fully on the prevention of cholera and the means of combatting. The reportory at the close is very convenient and useful.

Selections.

Doctors, Preachers and Religion.

It is not an uncommon thing to hear statements to the effect that the medical profession, as a whole, is irreligious. Such an assertion is worthy of a serious reply, and that reply is of necessity in the nature of a refutation. The practice of medicine tends to develop in all men of any intellectuality whatever, a realizing sense of the limitations of human power and skill, the fallibility of human judgment and the mutability of all things finite. Over and above these facts, the sincere searcher for truth recognizes the supreme power of God. Growing out of this knowledge there is, in most men of experience, developed a reverent spirit which acknowledges with sincerity the ever present guidance and control of the Divinity.

Such belief, however, does not necessarily impose upon the man any agreement with or submission to non-essential statements of belief that are compiled largely by men whose education, life and experiences are wholly different from his own. And so, of course, many physicians frankly disown or disavow the lines of belief laid down for them by mere preachers, being fully persuaded that conscientious adherence to the great truths that constitute the essential element of religion renders unnecessary the non-essential and often utterly unwarranted addenda which the preachers have pinned on to our great system of belief. The physician is often painfully aware that the constituted church authorities are both incapable intellectually, and unfit morally, to formulate rules for the guidance of other lives.

Much of the lack of confidence which physicians have in preachers, comes from the fact that preachers are as a rule not educated in the simplest matters concerning the physical being of man and of the whole natural world. Hence they are continually making the most absurd and irrational arguments, based perhaps on the "science" that is found in newspapers and which too often constitutes the sole basis of their scientific education. Hence, too, they are continually becoming the victims of the most shameful and ignorant charlatans, who have found by experience that nothing is too irrational to obtain the sanction of the pulpit. Quacks of all

descriptions, imposters of the vilest sort, so-called "patent" medicines of least possible value, robbers of the poor, slayers of the innocent, all and every one of them thrive and grow fat because of fulsome pulpit eulogies and more fulsome testimonials from preachers. Is it any wonder that honest men, whose wide and often sad experience has given them opportunity to know and appreciate the foul character of many of these illegitimate money-makers and their money making schemes, should turn in disgust from association with those mistaken disciples, who by voice and pen have done what they could to make fraud successful, and should determine in the future to serve the Master without the intermediary of what they believe to be a falsehood-sullied pulpit. —*Denver Medical Times.*

The Treatment of Post-Partum Hemorrhage.

Herman (*Revue Medico-Chirurgicale des Maladies des Femmes*, May 25, 1893) states that compression of the vessels is the most rational means of arresting post-partum hemorrhage. As preventive means the following considerations should be borne in mind: To render assistance if the uterus is inactive; to pay most minute attention to the details of the third portion of delivery. As treatment he advises massage of the uterus, with the hand placed upon the abdomen. If this is not successful, the introduction of the hand into the uterus to prove conclusively that it is perfectly empty. Finally, injections of hot water within the uterine cavity. If these means fail, persistent bimanual compression of the uterus should be made, assisted in its action by putting the infant to the breast. Injections of iron solution are dangerous, because they may cause death by distention of the uterus, peritonitis, or septicæmia. The introduction of iodoform gauze is not without its disadvantages; sometimes it is a means of allowing air to enter the veins, and it always prevents normal contraction of the uterus.

Dr. George Ross, chief surgeon of the Richmond & Danville railroad and the "flowery writer" of the National Association of Railway Surgeons, has recently been elected to the position of professor of obstetrics in the college of physicians and surgeons, Richmond, Va. The college is fortunate in securing so able a man to fill this position.

Detroit Physicians' Protective Association.

To unite for the protection of material interests seems a characteristic of the times. In Detroit this has taken the form of an organization with a name as stated above. The main object seems to be the collection of that which is due physicians from those able to pay the same.

Dr. John J. Mulheron is president; Dr. L. J. Lennox, vice-president; Dr. P. M. Hickey, secretary; Dr. S. H. Knight, treasurer. Directors—Drs. A. W. Collins, L. J. Lennox, R. C. Olin, F. L. Shurly, Hal C. Wyman, John L. Irwin, G. G. Caron, D. Kerr and R. H. Stevens.

Each member of the Association is expected to turn into the Association each month at least ten dollars' worth of collectable accounts, for which a commission of one dollar will be kept by the Association. In default of this, each member will pay one dollar monthly to the Association.

It is expected that the membership will be at least three hundred. Thus the income of the Association cannot fall below \$3,600 per year. With this it will be able to pay efficient collectors and do its work in a satisfactory manner. It is hoped that the income will be several times this, as many of the members have incomes of from five to fifteen thousand dollars or more per year.

Certainly every friend of the profession will bid this movement "good speed."

Its success will rest upon the business methods of its members. The membership includes all medical practitioners. Regulars and irregulars, males and females, white and black, young and old, have joined hands in an organized effort to secure payment for their services. If each member will keep his books with promptness and accuracy, so that they will stand an examination in court, there can be no failure, or at least need be no failure. But from what personal knowledge the writer possesses of the business methods of the average physician, it is to be feared that trouble will arise from this source. It would be a great success if the Association could induce its members to transact their private business in accord with business methods. It is certain that because of deficiencies in this respect the medical profession here and everywhere has suffered greatly.

Closely associated with this duty is that of inducing each member of the profession to support a system of fees as uniform as is possible, and to check the tendency of some to cut rates for the purpose of increasing their visiting list. In short, if the Association can promote honest, fair dealing of each member with his fellow-doctors and the laity, Detroit will have entered upon the Medical Millennium.—*American Lancet*.

Homœopathic Materia Medica.

If there is anything a homœopathist is strong on, it is materia medica, and at the Chicago Auxiliary they made it second only to surgery. Whether it was stronger, I leave you to judge from the following specimen, which is not a joke, though it reads like one: A learned professor was discoursing on *sepia* as a remedy in diseases of women. Said he: "I have used it for twenty-five years with unvarying success, and I have yet to see a case of 'proci-dentia' that it will not relieve. To show you that I am not exaggerating its virtues, I will call upon a lady to give you the history of a case."

The lady arose and gave an account of "female weakness," with backache, legache, pelvic distress, and other concomitants, which carried a vivid idea of her uterine distress. At this time *sepia* was administered, and shortly afterwards she was married. The recovery was wonderful, but the hearer was left in doubt which juice was of the most benefit, the cuttle-fish or the man. Some one remarked (*sotto voce*) that if the baby was white he should think it was the man.—*Eclectic Medical Journal*.

Three Classes.

Charles Kingsley, writing to some young friends who were addicted to gambling, says: "My dear boys, the human race may, for all practical purposes, be divided into three parts: (1) Honest men, who intend to do right, and do it; (2) knaves who mean to do wrong, and do it: (3) fools, who aim to do whichever is the pleasanter. This latter class may be sub-divided thus: (1) Black fools, who would rather do wrong, but dare not unless with the crowd; (2) white fools, who would rather do right, but take courage unless it is in the fashion.—*Selected*.

Editorial Change.

Dr. J. C. Culbertson, for the past two years editor of the "Journal of the American Medical Association," has returned to Cincinnati and resumed editorial management of the "Lancet and Clinic." Dr. John B. Hamilton has taken charge of the editorial department of the "Journal."

Bathing After Excessive Exercise.

The popular notion of the injurious effect of a cold bath taken by one who is overheated from exercise must possess—as all such ideas have—some basis in experience; and yet it is falsified by the experience of athletes from the days of the Greeks and Romans even until now, who find in this procedure a refreshing and stimulating tonic after the exertion they have recently undergone. And, physiologically speaking, a cold plunge or douche taken immediately after the physical effort, when the skin is acting freely and there is a sense of heat throughout the body, is as rational as in the experience of the athlete it is beneficial. It is paralleled by the tonic effect produced by the cold plunge when the skin is actively secreting after a Turkish bath, and finds its rationale doubtless in the stimulation of the nervous system, in the increase of internal circulation, and also in the renewal of activity to the cutaneous circulation after the momentary contraction of blood vessels due to the cold. The popular belief doubtless rests on the injurious effects which may be induced by the bath in one who does not resort to it immediately, but allows time for the effects of fatigue to show themselves on the muscles and nerves and for the surface of the body to get cool. Taken, then, the bath is more likely to depress than to stimulate, there is less power of reaction and greater liability to internal inflammations. At such a time a warm bath rather than a cold one is more suitable and more safe. It has been suggested, however, that the practice of indulging in a bath after violent exercise may initiate renal disease. Of this there is no evidence. The transitory albuminuria observed after prolonged cold baths may indicate the disturbance in the renal circulation which ensues upon them, but these cases are in a different category from those to which we are now alluding, nor are we aware of any facts to prove that, even in them, Bright's disease has been developed in

consequence of the transient departure from the normal. Lastly, it must be remembered that those indulging in athletic exercises of all kinds are presumably sound in heart as well as limb, and that such persons may take with impunity, and indeed with benefit, measures which would be distinctly harmful to the weakly.—*London Lancet*.

Helen Kellar.

Helen Kellar, the remarkable child who, although from infancy blind and deaf and dumb, has accomplished so much that is beautiful and inspiring, numbers among her friends many persons all over the world, and some of royal station in European courts, who never saw her. One of these, says the Boston Globe, is the Queen of Greece, who learned of Helen through Michael Anagnos, the Director of the Institution for the Blind, when he visited Greece some time ago. She expressed on more than one occasion her surprise that Helen, who is not yet in her teens, should have so remarkable a command of the purest English, and hinted that the child might have had some assistance in the preparation of her letters. But Mr. Anagnos assured the lady that there was no person connected with the institution who could write English so faultlessly pure and sweet as Helen wrote, since the little girl, in consequence of her infirmity, had never had an opportunity to form acquaintance with any but the loftiest models of the language. But Helen has at last learned to articulate, and can now speak as freely and fully as any unafflicted person. When she wishes to hold a long conversation with anybody dear to her, she places one finger across the lips of the speaker and another on the throat at the larynx. This is the way she "hears," and understands every word that is uttered in ordinarily rapid conversation. The perception, remarks the Sanitarian, is evidently of like nature with her enjoyment of music—through the vibrations which are conveyed to her mind through her body.—*N. Y. Medical Times*.

Dr. J. T. Whittaker, in the Journal of the American Medical Association, calls attention to the headache induced by gonorrhœa. It is most common in cases in which the posterior urethra is attacked. With the headache are restlessness, insomnia, jactitation, etc. These cases require topical treatment by the catheter, which carries nitrate of silver to the prostate gland.

Japanese Nursery Notes.

Dr. Albert S. Ashmead, in the University Med. Magazine, says: "It has often been said that the Japanese are the most interesting, the strangest, even the quaintest, people we know. In no regard is this truer than in the care they take of their babies. Such a strong foundation is more necessary than elsewhere to a nation where man is born to remain a baby his whole life. We, destined to exercise stronger and more serious minds, would be, at the very beginning of our existence, deteriorated by such ingenious, untiring care.

I have spoken in another article* of the long continued lactation of Japanese women as benefiting both mother and child; also of the care taken of pregnant women, in which a solicitude displays itself at the same time clever and loving. These tender and intelligent attentions paid to the born baby is the second part of that unique Japanese system of rearing healthy and happy men, which makes European and American ladies forget that so many other Japanese conceits are a severe shock to their feelings.

During the dentition period the children have an extra diet, consisting of fish and small crustaceæ. Japanese not being a carnivorous people, this is natural enough. If they ate meat they would give their children beef very likely. But it is certainly to the advantage of the bony structure of the child to be, on first entering the adult course of eating, fed in the Japanese manner.

The abominable diaper is unknown to the Japanese. They use only a breech-clout, which is removed at the moment of defecation. The child is then put in such a position that its legs straddle the arms, its body and head resting against the abdomen of the parent who, gently rocking it in a certain rhythmical, tentative fashion, and accompanying this action with a kind of low whistling, reminding you of a lullaby, gives her offspring its first lesson in personal cleanliness, which, to the Japanese mind, is exceedingly next to godliness. It will be seen how by this method unnatural positions are avoided, a thing the more important that Japan is the country of worms, distomata, etc.

It is known probably to every reading person that Japan, like all Oriental lands, is, for obvious reasons, furnitureless. It does not

**Medical Record*, October 11, 1890, on the Non-existence of Rachitis in Japan.

even know the cradle. As Diogenes made a cup of his hollow hand, thus the Japanese mother makes a cradle of the back of an older child, an ambulating, delightful cradle, where it stays from morning to night, and is unrhythmically rocked according to the chances and sports which the day offers to its patient and loving victim. Her back, of course, is its first cradle ; when it wants the breast it reaches over or under her arm for it.

The cause of the absence of furniture is the presence of tropical vermin. This awful presence is probably, also, the cause of the carpetless state of the nursery.

The floor is covered with stuffed straw mats, thick and elastic ; it is the usual floor of a Japanese house. This floor is mopped every day with salt water ; it is in fact a chlorine wash. It must be remembered that in Japan the dirt of the street is not carried into the room, sandals and shoes being left at the front door. The necessity of keeping the floor in a sanitary condition is more important in Japan than anywhere else, because of the national habit not only of sitting but sleeping on the floor.

There is a singular difference between the carriage of Japanese children and the way in which our children walk and move about. The Japanese urchin, whose feet never knew the unkind pressure of tight shoes, and, in fact, no pressure at all ; walks more erect, is more sure footed. In fair weather he wears flat shoe sandals ; in these sandals the big toe is widely separated from the others, which gives the child a sure foundation. In wet weather he must maintain his equilibrium on his stilt-like wooden clogs, which keep his feet dry, at the same time compelling him to acquire an extraordinary power over his own motions.

There is in Japan no kissing, not even in the nursery. All the dangers which have been so eloquently described in newspapers some time ago, arising from the touch of lips, in human love directly, and at the communion table indirectly, are avoided by the national aversion for labial contact.

The sexes are separated at an early age, and the separation is maintained until marriage. After marriage the husband has the right to annex to his household as many concubines as his means will allow. If his wife is delicate, he will perhaps suggest some friend of hers, who will prove rather an ally than a rival ; at any rate, there will be no diminution of the friendship between the two

women. When pregnancy occurs, a second concubine may be suggested, and no such addition ever troubles the quiet waters of a Japanese household. It is incredible what amount of peace, and consequently happiness, the absence of the green monster alone may be the cause.

When she loses a child, the Japanese mother does not wring her hands and look up to heaven ; she sits, with folded hands, sunken head, her eyes looking into her lap. Japanese grief has been very eloquently described by my colleague in Japan, Professor Wernick, and I think it will be a good winding up of this little article if I quote a passage of his remarkable book, "Geographico-Medical Studies" :

"However often I have witnessed the death of dear relations—children, for instance, or husbands—I never had occasion to observe the wringing of hands to which European women of the lower classes are much addicted. A bitter sorrow was expressed through deep sinking of the head, grasping of the hands together, shedding of tears. That strong mental agony which digs into the soul, so to speak, and takes hold of it like a bodily pain, seems to be unknown to them. They never turn to heaven, their faces bathed in tears, an action which to us seems not only natural and in perfect accord with the essence of grief, but is considered as beautiful and as a worthy subject of artistic representation. In prayer the Japanese mother does not lift her eyes to heaven ; with bent head, the body somewhat shrunk together, with hands put together by the palms and slightly raised to the level of the chin, she sends her humble prayer for quite concrete things, you may be sure, to Buddha."

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Cleburne, Texas.

J. L. WAGLEY, M. D.

Doctors' and Lawyers' Fees.

We had a great excitement a few weeks ago in San Francisco (Pac. Med. Jour.). Men who scarcely knew each other and were in the habit of passing with the slightest recognition, stopped, clasped each other's hands, looked earnestly in to each other's faces, spoke in a subdued tone of voice and showed all the evidence of having heard portentous news. Nothing else was talked of at the clubs, chestnuts were at a discount, and even club scandal was neglected for the time. The great daily papers as well as the weekly news scavengers, lent their assistance to fan the popular excitement. John W. Mackay, the many times millionaire, had been shot by a would-be assassin; this, however, was not the cause of the excitement (shooting a man, even a millionaire, in California, has long since ceased to be a novelty). The excitement was about the fact that two medical gentlemen who extracted the bullet and saved the millionaire's life, had charged him \$12,500. For the too little sympathy that the millionaire received when he was shot, everybody, press and paper, made up for the neglect now. Millionaires congratulated each other that they were not in need of medical service, and hoped when their taking-off time came, their departure would be a sudden one—no chance for a physician to wreck their estate. The foolish fellows in their excitement forgot that their estates were in no danger of being wrecked, forgot that their attorneys would protect it.

Since recovery from his wounds and the \$12,500 indignation shock, he has asked the probate court for permission to distribute the property and close an estate for which he was executor. Among the items of expense which he incurred as executor of this estate is attorney fees, \$26,160; for what? For piloting this will through the probate court, an automatic procedure that required neither skill, ability, learning nor judgment. Will John W. Mackay explain why he was willing to allow the attorney \$26,160 for the service rendered and refused to pay his physicians \$12,500 for services that required much more individual skill and judgment and a thousand times more responsibility on their part than was required of the attorney? The \$26,160 item created no excitement, but one newspaper seems to have noticed it, and congratulated the attorney on having received a good fee. Perhaps the daily or weekly press

will explain why a millionaire should not pay a physician as liberally as he does an attorney.

Another attorney of this city is receiving the congratulations of the press and his friends on the receipt a few days ago of a fee of \$75,000. The attorney received one-fifth interest in the estate, which was then involved in litigation. What would he think of a physician who would undertake to cure a patient for a certain interest in his (the patient's) estate?

Epilepsy.

It is estimated that there are between fifty and sixty thousand epileptics in the United States. A great number of these unfortunates are disabled from earning a livelihood owing to their indisposition, and their condition is in consequence aggravated by the lack of physical and mental employment resulting in some instances in enfeebled mind. It is generally conceded by the medical profession that the Bromides are the most valuable remedial agents we possess for this class of sufferers, hence the necessity of giving a pure Bromide, and the physician feels that his patient is getting the full benefit of the salt in its purity when he prescribes Elixir Six Bromides (Walker-Green's). We frequently see bad effects from the Bromides given alone, as they are known to accumulate in the system, but this danger is averted in the Elixir Six Bromides by its combination with *Cannibus Indica*, which is diuretic, and the Bromides being carried off by the kidneys, it precludes the possibility of the cumulative action of the Bromide. To avoid gastric and nervous disturbances, it is well to commence taking this Elixir in minimum doses and to gradually increase the quantity till the physiological effect is attained.

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R	Dioivburnia.....	℥ ij.
	Tr. Camphor.....	℥ ij.
M.	Dessertspoonful as required.	

Always teach a nurse that a child cannot swallow as long as the spoon is between the teeth; that it is advisable to depress the tongue a brief moment, and withdraw the spoon at once, and that now and then a momentary compression of the nose is a good adjuvant.

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The Preservation of the Hymen from a Medico-legal Point of View.

While no well-informed physician would for a moment believe that the absence, or the existence of vestigial remains, of the hymen was good evidence that a woman was not a *virgo intacta*, there are reported cases in which the existence of a hymen has interfered with the delivery of a pregnant woman.

The Medical Week for July 14th gives the report of a recent meeting of the Paris Medico-legal Society, at which Dr. Motet reported an interesting medico-legal case in which the plaintiff, a woman whose first husband had died after eighteen months of married life, married a second time; after cohabiting eight months with her second husband she brought an action for divorce on the ground that her husband refused to fulfill the obligations of matrimony. She was submitted to a medical examination, when it was found that her hymen was still intact. The court held that the medical evidence was very much weakened by the fact that the plaintiff had already been married once, and that there was no evidence whatever of voluntary abstention on the part of the husband. Dr. de Beauvais stated that he had seen a case of pregnancy with unruptured hymen in a domestic servant who had been raped by her employer. She had consulted a medical man immediately after the act, but from the presence of the hymen the latter had regarded her as a *virgo intacta*. Dr. Vibert advised that in a medico-legal examination one should take into consideration not only the state of the hymen, but also any inherent peculiarity that might be present, such as a resistant nature of the hymen. Dr. Guillot very properly called attention to the fact that rape does not consist so much in the destruction of the hymen as in the more or less complete carnal knowledge of a woman without her consent. This is so, for the case that under the law a prostitute may bring an action for rape. Dr. Christian said that in a case similar to that referred to by Dr. de Beauvais, the physician, before concluding that the girl had not been raped, should examine her for ecchymoses, traces of seminal fluid, etc. Dr. Motet also reported a case of a girl of sixteen who had been arrested in the street and sent to the venereal wards of the Lyons Hotel Dieu for treatment for venereal disease. While she was there it was discovered that

she was in an advanced state of pregnancy, although her hymen was intact and the orifice of the vagina barely admitted the little finger. The girl stated that she had been raped a few months previously.

For Tired Feet.

Walking heats the feet, standing causes them to swell, and both are tiresome and exhaustive when prolonged. There are various kinds of foot baths; authorities differ as to their value. Hot water enlarges the feet by drawing the blood to them; when used they should be rubbed or exercised before attempting to put on a tight boot. Mustard and hot water in foot bath will sidetrack a fever if taken in time, cure a nervous headache and induce sleep. Bunions, corns and callousness are nature's protection against bad shoe leather. Two hot foot baths a week and a little pedicuring will remove the cause of much discomfort.

A warm bath with an ounce of sea salt is almost as restful as a nap. Paddle in the water until it cools, dry with a rough towel, put on fresh stockings, have a change of shoes, and the woman who was "ready to drop" will have a very good understanding in ten minutes. The quickest relief from fatigue is to plunge the foot in ice-cold water and keep it immersed until there is a sensation of warmth. Another tonic for the sole is a handful of alcohol. This is a sure way of drying the feet after being out in the storm. Spirit baths are used by professional dancers, acrobats and pedestrians to keep the feet in condition.

Treatment of Asthma.

Dr. M. J. P. Nuel recognizes in the filaments described by Curschmann, 1882, an important factor in the causation of bronchial asthma. Believing that these filaments, in the case of the eye, have their origin in a retarded elimination of corneal epithelium with a tendency to the formation of mucus, and noting that a two per cent. solution of chloride of ammonium favored this elimination and liquefied the mucus, he believes that the same remedy would benefit the bronchial asthmas, and this belief has been confirmed by the marked success attained by Dr. Delbovier.—*Bulletin de l'Academie Royal de Medecine de Belgique.*

Neuritis from Alcohol.

Dr. Drysdale, of London, in a recent discussion remarked as follows: The statement that alcoholic neuritis is more common with women than men, is not sustained by my experience. The changes that take place in these neurites are either interstitial or parenchymatous; the latter is the more common. The spinal cord is usually unaffected, but the muscles of the limbs are atrophied. The patient first complains of tingling of the extremities, of numbness, at first in the hands and feet, then extending to the legs, which gradually lose their power. The patient is usually apyretic, going about his usual occupations for a time, until, at last, he takes to his bed. The extensors first show a decided weakening of both the upper and lower extremity, the patient lying in bed with the toes pointed or exhibiting foot-drop. The weakened muscles gradually atrophied, especially the anterior tibial, and interossei of the hand. These muscles do not react to interrupted current, and are variously affected by the continuous current. Anesthesia is marked in many cases, but occasionally the reverse is present. The muscles are tender to pressure for a long time, especially over the calf. The reflexes are absent, and the legs eventually become contracted and adhesions form around the joint. The patients are, as a rule, apathetic and without appreciation of their condition. Often this disease simulates locomotor ataxy when it affects the lower extremities specifically. It is distinguished from ataxy by tenderness of the muscles and dropping of the foot. In syphilis there is great tenderness of other parts of the body, especially as seen in female patients. The main point of treatment is cutting off the alcohol at once. Where rheumatism complicates the case, salicylate of sodium is of value. The continuous current is valuable in wasted muscles, and in cases much reduced a water bed is essential to prevent bed sores. The treatment is essentially a tonic and a building up one.—*Journal of Inebriety.*

I have been using Caulocorea for the past four years as an antispasmodic tonic and diuretic in dysmenorrhœa, leucorrhœa, amenorrhœa, and in many other conditions and find no other remedy answering the same conditions as well. As I become more familiar with its powers I am better pleased with its results.

C. P. GERRISH, M. D.

The Successful Medical Practitioner.

BY JAMES R. WALLACE, M. D.

Many a worthy man is disappointed in the career which he has chosen in life; but many others are disappointed to the world or to their professional brethren. These last often start life with every favoring wind to fan them on to fame and fortune; but the rising lights to which good friends proudly pointed as being certain to quickly burst into grand effulgence, often sink into darkness and oblivion. And why? There are two great causes of professional failure: (1) making work subordinate to pleasure, and (2) disregarding those rules, written and unwritten, which should guide one in professional and social relations. With the medical man there is a third potent cause of failure, and that is the absence of a tenderness of action and of a kind and ready sympathy with all those whom he is called to help professionally. All the advantages of superior medical training, excellence of bearing, skillful manipulation, etc., are of little avail if unaccompanied by gentleness of manner and of touch, and whatever will make your patient realize that you feel for him or her. The medical practitioner, then, to be successful, must lay to heart three rules at least: (1) Business first, then pleasure; (2) To be a respecter of the Ethical Code; (3) To be gentle, kind and sympathetic.—*Indian Medical Record*.

Toothache.

Dr. Gatchkovsky has discovered that the "electric breeze" is an admirable calmative agent in odontalgia. The brush is placed over the aching tooth and the patient placed upon an insulated chair, as in the administration of static electricity. Curiously enough, he has found this current to exercise a sedative effect not only upon nervous toothache, but also those of inflammatory origin and pulpitis or periostitis. The pain begins to diminish in two or three, to disappear completely within five or six, minutes. The pain may return, but it will be less intense and yield to a few sittings of at least ten minutes' duration. Under the influence of this current the gums become manifestly pale at the time that the toothache disappears. He has employed it in seventy-five cases, with but three failures.—*La Semaine Med.*

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A Curious Condition of the Bladder.

Dr. James Kennedy, in *New York Medical Journal*, says: I have quite recently had under my observation two patients upon whom I had operated and whose bladders presented curious phenomena. One was a lady upon whom I had performed trachelorrhaphy and perineorrhaphy, and the other was a man upon whom I had practiced stretching of the great sciatic nerve.

In the case of the woman, when the perineorrhaphy was completed, I introduced an ordinary female catheter with a view of emptying the bladder, but not a drop of urine would flow through the instrument. I withdrew it and introduced an elastic instrument, but still no urine would pass. I then made pressure over the pubes and forced out some three ounces or more. The experiment was repeated twice daily for several days, and although the bladder might contain several ounces of urine and the desire to micturate would be very intense, she could not relieve herself except in the sitting posture (and this was forbidden for the time); neither would any urine find its way through the catheter unless pressure over the bladder was made.

The man's case was very similar, though of shorter duration. I received an urgent call from him on the night of the same day that the operation was performed. He was suffering great agony on account of his bladder and had an intense desire to urinate, but could not do so.

I introduced a metallic catheter without difficulty, but no urine would flow through it, although perfectly open. Flexible and soft rubber instruments were tried alternately, but did not succeed in relieving him until pressure was made over the region of the bladder. In withdrawing the metallic instrument, a few drops of urine would flow from it, showing without question that the catheter had entered the bladder. His bladder contained, on the occasion of which I speak, fully six ounces of urine, which I succeeded in drawing off only by persistent pressure over that organ. When the pressure was withdrawn the flow ceased and recommenced when pressure was reapplied.

In both of these cases there was evidently a temporary absence of contractility. What produced this condition I am unable to say, unless there was paralysis of the afferent nerves supplying this

organ produced reflexly by the traumatism to the parts operated upon. Inhibition was probably not interfered with, but when withdrawn by the patient's will or by the introduction of an instrument, there was not force in the bladder walls to carry out the desire created by the pain occasioned by the pressure of the urine.

Causation of the Diseases of Women.

If proper attention were given to growing girls, especially about the time of puberty, and a more normal development of the sexual organs secured; if gonorrhœa were more vigorously treated, and if the subjects of that disease were kept under observation until all abnormal discharges were arrested, and proper instructions concerning the abstention from sexual intercourse were given; if anti-septic midwifery were faithfully and efficiently practiced; if lacerations of the cervix and perineum were early repaired; and if full instructions concerning the ill effects of constipation, improper dress and erroneous habits of living, were given, the prevalence of the diseases peculiar to women would be very greatly restricted. I believe that this is to be the next great advance in diseases of women. Gynæcologists must bring home to the general practitioner the fact that the diseases of women are largely preventable, and make him feel his responsibilities, both as to their production after present methods of practice and as to the possibilities of their prevention after improved methods. When the family physician realizes that it lies within his power very largely to prevent disease among the women of the families committed to his care, his sense of moral obligation will spur him on to do his full duty in this matter. When that day comes the universal prevalence of disease among women will cease to be a reproach to preventive medicine.
—C. P. Noble, *Int. Med. Mag.*

Professor G. A. Sacharjin, one of the greatest doctors of the Russian Empire, living in Moscow, was recently called to visit Mme. Tereschtschenko, wife of a rich landed proprietor in the Skwira district. In addition to all expenses he received about \$7,000 for his advice and aid. An assistant who accompanied his chief left the country place the richer by \$1,000. M. Tereschtschenko, however, will not miss the money. He hired a special train later to get the medicines ordered by the professor in Kieff.

Ergot in Obstetrics.

1. Ergot affects all distal muscle fibres the same.
2. Its most powerful action is on the os internum.
3. Causes contraction of the uterus with incompleteness of retraction.
4. Contra-indicated in inertia utero, especially that of primiparæ.
5. It should never be given to expel secundines after abortions.
6. It is only a secondary measure in treatment of post-partum hemorrhage.
7. Unnecessary after placental stage.
8. Causes unnecessary after-pains.
9. It may influence lacteal secretion if given routinely in tonic doses subsequent to delivery.—DR. HARRINGTON, in *Ontario Med. Journal*.

C. W. Womack, under date of June 7, 1893, writes from Chapel Hill, Tenn. : "In pneumonia, especially where there is restlessness, I have never found anything to equal this—

R Antikamnia gr. iv.
 Syrup Dovers..... dr. i.
 Tinct. Digitalis..... gtt. iv.
 Whiskey Toddy or egg nogg, one to two oz. Mix and give at one dose.
 Repeat every three to six hours as needed.

In painful menstruation I use the following formula :

R Antikamnia..... gr. x.
 Atropia Sul..... gr. 1.200.
 ℞. Sig. Give at one dose, repeating if necessary.

"I often use the Atropia with Antikamnia in neuralgia, but usually the Antikamnia is sufficient without any combination. I also use Antikamnia combined or alternating with Quinine. In the after pains of parturition, nothing I have ever used is so sure to give relief as Antikamnia alone or combined with Dovers. I have also combined it with Salicylate of Soda in rheumatism, with excellent results."

Lawson Tait's Independence.

Lawson Tait has made himself exceedingly unpopular in England by his radical opinions.

We would advise him to remove to America, where there is plenty of room for the growth of a man's individuality.

Antiquity of Syphilis.

Dr. J. T. Jelks, of Hot Springs, Ark., said in a recent paper that Dr. Buret had proved that syphilis was known many centuries before the Christian era. In 1921 B. C., Abraham introduced his wife Sarah as his sister to the court of the Egyptian Pharoah, who took her to wife, and as a consequence infected himself and all his other wives, so that the infection spread through the court and a plague of sterility followed. In the book of Psalms, King David graphically describes his sufferings due to his own transgression, and his description is a perfect representation of tertiary syphilis with iritis and gummata. Moses speaks of a severe epidemic among his men following upon their intimate relations with Moabitish women. To check it he ordered the massacre of twenty-four thousand tainted men, and later all the women who had known men carnally. The worship in the temples of Baal was simply prostitution, and the epidemic of Baal was undoubtedly syphilis, although possibly in a rather more acute form than it presents to-day, as the human race may now be partially inured to it through the sufferings of former generations.

Abstract from Helbing's Ph. Record, June '93 Number.

Dr. F. W. Passmore and myself have conducted a series of examinations on Cocaine Preparations.

The accruing advantages obtained from systematic investigation of these bases are readily recognized.

There is hardly any alkaloid compound which is found in commerce in more varying degrees of purity than Cocaine, and none which is more important to obtain pure.

It gives me pleasure to place on record the fact that the Cocaine preparations, and especially the Hydrochlorate of Cocaine of C. F. Boshringer & Soshns, have been found free from all impurities; they answer all the tests of the pharmacopias and yield definite, unvarying physiological action without secondary effects.

It can only be by patient investigation vigilantly pursued that this manufactory has attained the high standard of purity reached by the preparations we have reported upon.

H. HELBING, F. C. S.,
Analytical and Consulting Chemist,
63 Queen Victoria Street, London, E. C.

Physicians who have been disappointed in the use of favorite Prescriptions have the remedy in their own hands. Prescriptions and orders should read "Wm. S. M. Chem. Co."

GREEN: DRUG FLUID EXTRACTS

CHARACTERISTICS:

UNIFORM STRENGTH, CONVENIENCE OF ADMINISTRATION, NON-LIABILITY TO DETERIORATION BY AGE, POSITIVE THERAPEUTIC EFFICACY.

The WM. S. MERRELL CHEMICAL CO. will not hold themselves responsible for the identity of Fluid Extracts, filled out by druggists from bulk stock, even though the written label may read "Merrell's." CAUTION.—Accept original packages only.

 Read our Monograph—"Green Drug Fluid Extracts: Their Origin, History and Rationale." Sent free to any address.

NATURAL.	}	TRUE
FROM		SALICYLIC ACID.
WINTERGREEN OIL.		TRUE
		SALICYLATE SODIUM

IT IS ACKNOWLEDGED THAT

COMMERCIAL
SALICYLIC ACID
AND ITS
SODIUM SALT

are slow but certain poisons.
produce symptoms closely resembling delirium tremens.
patients become delirious.
dangerous to human life.
have to be watched and not to be trusted.
retard convalescence.
should not be administered internally, however much they may have been dialyzed or purified.

Order and Prescribe  { ACID SALICYLIC—True—MERRELL.
SODIUM SALICYLATE—True—MERRELL.

FLUID HYDRASTIS.

A solution of definite strength and reliability, representing all the valuable constituents of the drug—the offensive and irritating resins being rejected. The only perfect representative of the drug in the fluid form within reach of the medical profession. Though often attempted it has never been successfully imitated. Send for our pamphlet on "Hydrastis and its Preparations."

The Wm. S Merrell Chemical Co.,
Manufacturing Chemists,

96 Maiden Lane,

Laboratories,

A. J. Conner & Co.

New York City.

Cincinnati.

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And Wholesale Druggists throughout the United States.

Anderson Antiseptic Vaginal Capsules

FOR THE LOCAL TREATMENT OF

DISEASES OF THE VAGINA AND UTERUS.

The most efficient and cleanly means of introducing remedies into the vagina. Antiseptic, perfectly soluble and reliable. Each capsule contains an absorbent tampon which may be medicated with any remedy indicated.

WHEN?

In all cases of acute and chronic inflammation of the lining of the womb, gonorrhoea syphilitic, purulent and leucorrhoeal discharges.
Relaxation of the uterine ligaments and weakening of the vaginal walls.
Falling of the womb. Ulceration of the os uteri.
Disease of the ovaries and fallopian tubes.
Painful and scanty menstruation.
Where the womb is extremely irritable and neuralgic.

HOW?

Moisten the tampon with the remedy, draw it back into the capsule by means of the linen thread, replace cap and insert.

WHAT?

The result is a grateful relief to the sufferer and satisfaction to the physician. No handling of disagreeable drugs; no loss of medication in the introduction, no soiling of linen.

THE VERDICT!!

RATIONAL.

CONVENIENT.

CLEANLY.

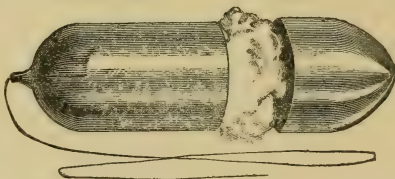
EFFICIENT.

Three Sizes.

No. 1 Small

No. 2 Medium

No. 3 Large



Tampon.

Absorbent Cotton,
Oulo-Kutin (Wool
and Cotton) or Wool,
as desired.

Exact size of No. 2 Capsule.

Any size by mail postpaid on receipt of price, 60c. per box.

VALUABLE AS A PESSARY.

Extract from a letter from Dr. A. J. Howe, Professor of Surgery, Eclectic Medical Institute, of Cincinnati, O.
"The Anderson's Vaginal Capsules charged with tampons of Oulo-Kutin are a convenient vehicle and medium for introducing douches or medicated fluids into the vagina, and retains them there. Astringent, sedative and antiseptic liquids may be thus employed, instead of the syringe as an implement, or a speculum."
Respectfully,
A. J. HOWE, M. D.

Send for printed matter containing valuable information.

THE HALL CAPSULE CO.

Manufacturing Chemists.

CINCINNATI, OHIO.

Have you seen our "Ruby Capsule" for disguising the physical appearance of prescriptions, and for use when two medicines are to be taken in alternation? Send 10c. for trial box of 100.

Bright's Disease.

Dr. Porter, in *International Clinics*, says: "The coal-tar products are contra-indicated in Bright's disease. They interfere with the functions of the liver." One-half to one grain of calomel three times a day, just enough to keep the bowels slightly relaxed, is good treatment in addition to the milk diet in this disease. He thinks the elevated temperature accompanying Bright's disease is the result of loading up the system with the specific poison and with the increased effete material, thus preventing the normal excretion of heat. Salicylates decrease the tendency of fermentation in the bowels. Three to five grains of sodium salicylate should be given every two hours. The salicylates have also a tendency to dilate the arterial system and flush the surface of the body, and increase the heat radiation, thereby reducing the temperature and diminishing the processes of oxidation, so that they act as very valuable and natural antipyretics. Ox bile he considers a valuable remedy, superior to salicylic acid in its antipyretic action. Two or three grains of purified inspissated bile should be given three or four times a day to get the best results. In typhoid fever the ox-bile treatment is used with the best of results.

False Premises.

Only truth can live, and fallacious reasoning, based upon false premises, must inevitably fall to the ground.

The principal objection which has been urged against proprietary medicines—that they are not ethical because secret—is untrue. All manufacturing chemists publish a list of the ingredients used in the composition of their medicines, and every physician, familiar with his *materia medica*, knows what to expect from the combination of drugs used. He has, moreover, a guarantee, in the name of the manufacturer, as to the purity of the drugs used and the strength and excellence of the preparation, a valuable piece of knowledge in the present day of close competition, poor drugs, imitation and substitution.

Measles.

In measles, when the temperature is high after the eruption has faded, there are complications.

Perforating Appendicitis.

Dr. Simon Baruch (Medical Record) emphasizes the point that symptoms of shock, carefully looked for, may always be found in perforating appendicitis. These are as follows: the countenance is anxious, the finger-tips, nose and ears are cool; pulse and respiration are out of proportion to temperature; the right inguinal region is very tender; the patient usually lies with the right leg drawn up. Guided by them, Dr. Baruch opposed the views of an experienced physician in one case, insisting upon the operation; and in another did not approve of the operation advised by an experienced surgeon. In both cases his reliance on these pathognomonic signs proved useful to the patient. On the ground of his experience, as well as that of others, the author urges that when perforating appendicitis is diagnosed, either positively or probably, an immediate operation to remove the exciting cause is as imperative as ligation of the vessel in hemorrhage.

A completely new Medical Dictionary is announced for early publication by Lea Brothers & Co. The author, Dr. Alexander Duane, of New York, is already widely known as the medical expert for Webster's International Dictionary. His work has been drafted to supply medical students with all desired information concerning the words they will meet in their course of reading, and as the vocabulary has been selected most liberally, the work will be of value to practitioners also. The pronunciation of each word is given by a simple and obvious phonetic spelling; then follows the derivation, an unexcelled aid to memory, and finally a full definition. Descriptive matter has been appended to such words as cannot be adequately explained by simple definition. Thus drugs are described, and their symptoms and treatment are given; drugs are followed by their properties, effects, doses, etc. Extensive tables of bacteria, doses, etc., are placed in the alphabet most convenient for reference. A work of real value is promised, and we shall take an early opportunity of reviewing it in these columns.

A doctor in Pine Bluff, Ark., who is hardly twenty-one years of age, has done eleven laparotomies, all successful. This proves that the doctor is a very enterprising man; but what can be the matter with the Pine Bluff ovary?

Glycerine Suppositories.

Dr. Grewcock writes recommending the use of a little ball of cotton wool the size of a walnut, saturated with glycerine, in place of glycerine injections. When such a ball is inserted into the rectum it soon provokes an abundant evacuation of the bowels.—*Med. Record.*

HEADQUARTERS UNITED CONFEDERATE VETERANS,
Room 21 Kenner Block, No. 25 Carondelet Street,
NEW ORLEANS, LA., Sept. 13th, 1893. }

To the Editors of the Charlotte Medical Journal:

MY DEAR SIRS—General J. B. Gordan, Commanding United Confederate Veterans, is anxious that the information showing progress made in organizing Camps in this benevolent association be given to the public, with the hope and belief that it will stimulate and encourage those veterans who have not yet organized to do so at once, and send their applications for necessary papers for membership immediately to these Headquarters, so as to be represented at Birmingham at the great Reunion on October 2d and 3d next. Applications will be received either by letter or telegraph up to the day of the Reunion.

Will you kindly aid the old veterans by publishing this letter and data in your valuable journal, in this issue.

The summary shows 391 Camps already registered. Applications are now in for necessary papers to form at least 100 more, so that if nothing prevents there will be nearly or quite 500 Camps marshalled at the Birmingham Reunion.

Summary of Camps by States :—Northeastern Texas Division, 13; Southwestern Texas Division, 12; total Texas, 129; Alabama, 56; Mississippi, 37; Louisiana, 31; Florida, 26; Kentucky, 25; Arkansas, 21; Tennessee, 15; South Carolina, 16; North Carolina, 10; Georgia, 8; Virginia, 7; Oklahoma, 4; Division Northwest, 2; Indian Territory, 2; Missouri, 1; District of Columbia, 1; total, 391 Camps.

Very respectfully,

GEO. MOORMAN,
Adjutant General and Chief of Staff.

A doctor of German origin lately committed suicide at Rochester. Before doing this he wrote out his death certificate, saying, among other things, that after coming to America "he lost caste and came down to be an American doctor."

Too Many Doctors.

We have not too many doctors. If the number were less, the standard of professional attainments would be lowered rather than raised and the grand workings of that fundamental law, sublime in its severity, "the survival of the fittest," would be seriously interfered with, to the final detriment of both the profession and the people.

Only the lower steps of the ladder of professional eminence are crowded, and those who have sufficient courage to continue the ascent, however steep and difficult it may prove, will surely find recognition and success awaiting them at the summit.

I am glad to state that I have formed a high opinion of Cactina Pillets. One case in which I tried them was an old gentleman who has been suffering for years from valvular disease of the heart, and who, for over four years has never been able to leave off taking some form of heart tonic. Latterly he had been taking strophanthus, but a month ago it brought on diarrhœa and we had to leave it off. Digitalis he could not take, and having tried strychnia and various other remedies without doing any good, I resorted to Cactina Pillets. I gave him a bottle of 100 pillets and marked improvement resulted, and since then he has taken more. He himself says he is stronger and better than he has been for years, for proof of which he can now walk about his grounds, whereas, he formerly had to be wheeled in a bath chair. One of my favorite prescriptions is the following :

R	Cactina Pillets.....	20.
	Ammon. Carb.....	30 grains.
	Spts. Chloroform.....	1 ½ drachms.
	Tinct. Columbæ.....	2 drachms.
	Aqua q. s. Ad.....	8 ounces.
M	Sig. One ounce three times a day.	

T. GORDON KELLY, M. D., A. B., etc.,
The Priory, Besford, Leicester, Eng.

Uterine Hemorrhage.

Dr. Homer C. Bloom, in Phil. Polyclinic, says: We have in atropia the most valuable drug that can be employed in this, one of the troublesome symptoms we meet with in the diseases of women.

THE BEST ANTISEPTIC
FOR BOTH INTERNAL AND EXTERNAL USE.
LISTERINE.

Non-Toxic, Non-Irritant, Non-Escharotic—Absolutely Safe, Agreeable and Convenient.

FORMULA.—LISTERINE is the essential antiseptic constituent of Thyme, Eucalyptus, Bapsidia, Gaultheria and Mentha Arvensis, in combination. Each fluid drachm also contains two grains of refined and purified Benzo-boracic Acid.

DOSE.—Internally: One teaspoonful three or more times a day (as indicated), either full strength, or diluted, as necessary for varied conditions.

LISTERINE is a well-proven antiseptic agent—an antizymotic—especially useful in the management of catarrhal conditions of the mucous membrane, adapted to internal use and to make and maintain surgical cleanliness—asepsis—in the treatment of all parts of the human body, whether by spray, injection, irrigation, atomization, inhalation, or simple local application, and therefore characterized by its particular adaptability to the field of

PREVENTIVE MEDICINE—INDIVIDUAL PROPHYLAXIS.

LISTERINE destroys promptly all odors emanating from diseased gums and teeth, and will be found of great value when taken internally, in teaspoonful doses, to control the fermentative eructations of dyspepsia, and to disinfect the mouth, throat and stomach. It is a perfect tooth and mouth wash,

INDISPENSABLE FOR THE DENTAL TOILET.

DISEASES OF THE URIC ACID DIATHESIS.

LAMBERT'S LITHIATED HYDRANGEA.

RENAL ALTERNATIVE—ANTI-LITHIC.

FORMULA.—Each fluid drachm of "LITHIATED HYDRANGEA" represents thirty grains FRESH HYDRANGEA and three grains of CHEMICALLY PURE Benzo-Salicylate of Lithia. Prepared by our improved process of osmosis, it is INVARIABLY OF DEFINITE and UNIFORM therapeutic strength, and hence can be depended upon in clinical practice.

DOSE.—One or two teaspoonfuls four times a day (preferably between meals.)

Close clinical observation has caused Lambert's Lithiated Hydrangea to be regarded by physicians generally as a very valuable Kidney Alterative and Anti-lithic agent in the treatment of

Urinary Calculus, Gout, Rheumatism, Cystitis, Diabetes, Hæmaturia, Bright's Disease, Albuminuria, and Vesical Irritations Generally.

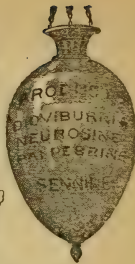
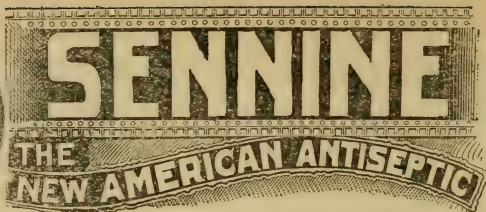
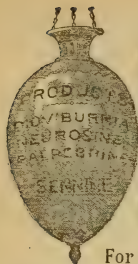
REALIZING that in many of the diseases in which LAMBERT'S LITHIATED HYDRANGEA has been found to possess great therapeutic value, it is of the highest importance that suitable diet be employed, we have had prepared for the convenience of physicians

DIETETIC NOTES.

suggesting the articles of food to be allowed or prohibited in several of these diseases. A book of these Dietetic Notes, each note perforated and convenient for the physician to detach and distribute to patients, supplied upon request, together with literature fully descriptive of LISTERINE AND LAMBERT'S LITHIATED HYDRANGEA.

LAMBERT PHARMACAL CO., St. Louis, U. S.

British, Canadian, French, Spanish, German and South American Trade Constantly Supplied.



For Internal and External Use in Medicine and Surgery.

COMPOSITION—A Chemically pure product of Boracic Acid and Phenol.

PHYSICAL PROPERTIES—A very fine White Powder, Odorless, Slightly Astringent, and of Sweetish Taste.

MEDICAL PROPERTIES—Antiseptic, Antizimotic, Bactericide, Deodorant, Disinfectant.

COMPARATIVELY INEXPENSIVE—Five parts of SENNINE dissolved in 100 parts of water, (2 $\frac{3}{4}$ make 4 pints) is sufficiently strong for an antiseptic wash.

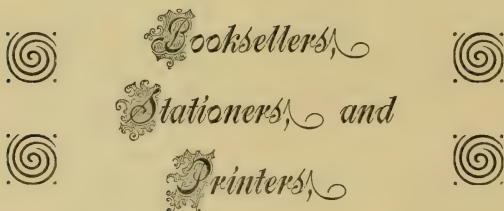
FREE FROM TOXIC AND IRRITATING EFFECTS, Therefore preferable to Carbolic Acid, Bichloride of Mercury, Iodoform, etc.

Put up in 2 oz. Tin Boxes with inner Perforated cover for convenience of applying. Price ONE DOLLAR.
Samples and literature mailed FREE to Physicians on Application.

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THE LARGEST AND MOST COMPLETE STOCK OF STATIONERY AND STATIONERS SPECIALTIES IN
WESTERN NORTH CAROLINA.

Abstracts.

Edward Warren Bey.

With the death of Dr. Edward Warren Bey a notable figure passed from among men—one who deserves as a text for his biography that chosen for the Napiers: "Fierce warres and faithful loves." His life was, of necessity, one of conflict, even with himself. His ambitions were lofty, and every consideration, save those of honor and duty, were secondary to their achievement. In his boyhood the triumphs and honors of the law fired his ambition, and it was the profession of his choice. But his father, who had devoted his life to the practice of medicine, earnestly desired that his son should succeed him, and in deference to the wishes of his father, he reluctantly consented, and began to fit himself for that profession, entering the University of Virginia, where he took the medical course.

But he could not forget his first love, and his interest was not awakened by his studies until a fellow student aroused his latent ambition by remarking in his presence that his failure to obtain a degree was a foregone conclusion. Though the time was short, he determined to win, and with the energy that characterized him in all the affairs of life, he applied himself to his studies, and carried off the honors of his class.

Returning to North Carolina after obtaining his degree, he began practicing medicine with his father. He had that quality of genius that awakened opposition, and opposition enlisted his highest powers; and with his earliest experiences as a physician began those professional conflicts of which his life was in a great measure full. After practicing a few years in North Carolina he decided to enter a larger field, and removed to Baltimore, where his attainments, professional and social, attracted attention, and brought him almost immediately a fair measure of professional work. At the breaking out of the war he tendered his services as a surgeon to the Confederacy, and rose to the rank of surgeon-general.

Returning to Baltimore at the close of the war, he resumed the practice of his profession, and was offered a professorship in the then Washington University. His early experiences as a teacher were unsatisfactory to himself. He felt that his lectures failed to

arouse the interest of his class, though he had bent the energies of his mind to their preparation. Disgusted with what he considered his failure, he flung his notes away in the midst of a lecture, with the remark to his class: "There go my bladders, boys; we will sink or swim without them." The applause of his students inspired him, and untrammelled by his notes, his lectures became a pleasure to him and an attraction to the college.

Maturer years and greater successes in a larger field brought still keener rivalries with them, and in some instances the hatred of his competitors was aroused against him. He was retained by the defence as an expert in the case of Mrs. Wharton, who was on trial at Alexandria, Va., charged with poisoning Gen. Ketchum.

Notwithstanding Dr. Warren's lofty ambition, his sympathies were easily enlisted. Convinced that an innocent victim was about to be sacrificed to the clamor and prejudice of her enemies, he entered into the fight with his whole soul. The prosecution called in as experts some of his keenest rivals, and it seemed that a pre-concerted effort was being made to crush the talented Carolinian, who had espoused almost as his own, Mrs. Wharton's cause. But he undauntedly entered the contest, though he knew that the conviction of the accused meant professional death to himself, and he demonstrated the innocence of the prisoner and disconcerted his enemies in one of the most hotly-contested conflicts that has ever been fought between experts in this country.

At the close of the war a number of Confederate soldiers (officers) sought service in the Egyptian army, which the Khedive at that time was reorganizing and endeavoring to put on a modern basis. Some of these, remembering Dr. Warren, brought his name before the Khedive, with the result that he was offered a commission in the Egyptian army, which he decided to accept. In this service he was brought face to face with another foe. His life had been one of conflict and contest in the professional arena, but his battles had been intellectual ones. In Egypt he found himself opposed by implacable race and religious prejudices and Oriental superstition. Here again he did not shrink from the contest, though a false move would have brought on him the vengeance of a Moslem mob or the poisoned cup of a fanatical assassin.

His confidence in himself was supreme, and he overcame all obstacles that stood between him and conspicuous success, and he

left Egypt with the confidence of the Khedive, who conferred the title of Bey upon him. An attack of ophthalmia, aggravated by the glaring Egyptian sun, made it necessary for him to choose between removal and blindness, and he decided to locate at Paris. Here other and new difficulties awaited him, the French laws so hedging in the medical profession that it is practically impossible for a foreigner to become a legal practitioner in Paris. But it was his ambition. His powerful energies soon surmounted the difficulties thrown in his way, and he had from the start a large and lucrative practice among the best families of the American colony in Paris, which he retained until his death.

His success in medicine was conspicuous, and in its practice he was not chained down by the ideas and advances of others. Gathering to himself the advanced thought of the medical world, on it he builded for himself.

To Dr. Warren the world is indebted for the hypodermic method of administering remedies. It was his acute intellect that saw the possibilities of the hypodermic syringe, and throughout the civilized world, suffering owes a debt of gratitude for relief to the genius of this eminent North Carolinian, whose dust, like that of so many of her sons, finds rest beneath alien skies.—*Charlotte Observer*.

A Pocket Night Lamp.

To instantly obtain a light sufficient to read the time by a watch or clock by night without danger of setting things on fire is an easy matter. Take an oblong vial of the clearest glass, put into it a piece of phosphorus about the size of a pea, pour upon this some pure olive oil, heated to the boiling point; the bottle is to be filled about one-third full, then cork tightly. To use the light remove the cork, allow the air to enter, then recork. The whole empty space in the bottle will then become luminous, and the light will be a good one. As soon as the light becomes dim its power can be increased by opening the bottle and allowing a fresh supply of air to enter.

In very cold weather it is sometimes necessary to heat the vial between the hands to increase the fluidity of the oil, and one bottle will last a whole winter. This ingenious contrivance may be carried in the pocket, and is used by watchmen in Paris in all the magazines where explosives or inflammable materials are stored.

Diagnostic Value of Electricity.

Dr. Apostoli (*Centralbl. f. Gyn.*) states that the faradic current can differentiate between an hysterical ovaralgia and an inflammatory affection of the adnexa. In the first the current will relieve the pain, while in the second it will be of no value. Intrauterine application of the galvanic current will indicate whether the adnexa are diseased or not by the degree of tolerance. He concludes as follows :

1. Every uterus that tolerates a galvanic current of one hundred to one hundred and fifty milliamperes has a healthy periphery, or at least for the time being there is no inflammation of the adnexa. A simple ovarian cyst does not affect the tolerance.

2. In every instance when the uterus does not tolerate a current strength of fifty milliamperes, and pain or fever follow, the condition of the adnexa is suspicious.

3. If the pains diminish in subsequent applications, then hysteria is present or a retrogression of an inflammatory condition of the adnexa has taken place.

4. If the intolerance increase and if fever set in, then there is present a purulent oophoro-salpingitis which calls for castration.

Lighting.

In the matter of light, the clear, white light furnished by the electric lamps is much less detrimental than the unsteadiness of any other form of lighting. An interesting observation was made some time ago by Mr. Henry Lea, of Birmingham, England, during a musical festival in that city; he found that when gas was used, the temperature near the ceiling rose from sixty degrees to one hundred degrees, after three hours' lighting. The heating effect of the gas was, therefore, the same as if four thousand two hundred and thirty persons had been added to the full audience and orchestra of three thousand one hundred. Similarly the vitiation of the air by carbonic acid was equal to that given off by the breathing of three thousand six hundred additional persons, added to the audience of three thousand. But he found, on evenings when the electric light was used, the temperature rose only one and a half degrees during seven hours' trial, and the air, of course, was vitiated only by the breathing of the audience.—*Times-Reg.*

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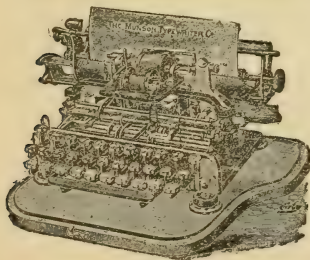
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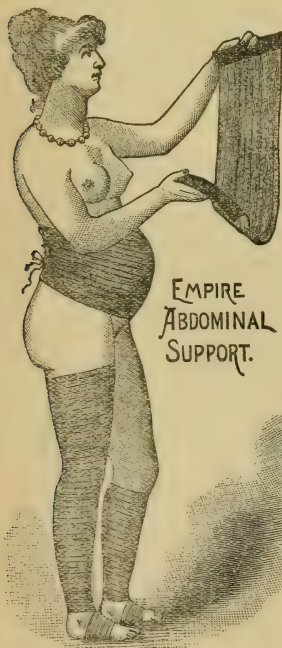
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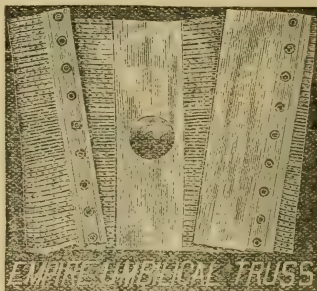
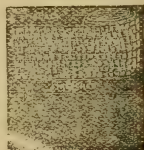
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Apoplexy.

Dr. Mills (Polyclinic) based the diagnosis of apoplexy on the following points :

1. The sudden fall, with unconsciousness at once, no injury perceptible, face white.

2. Respiration stertorous, noisy, puffing cheeks, tendency to Cheyne-Stokes, interrupted, improved by turning on side.

3. Right face droops more, and right cheek flaps more than the left. Right pupil widely dilated ; left contracted. Retinal veins distended. No rotation of head and eyes to one side.

4. Pulse full and slow ; temperature subnormal.

5. Convulsive movements noted at first have ceased ; both arms and legs drop lifeless equally. Left side was paralyzed first. Sensation almost completely abolished.

The urine was albuminous and loaded with casts ; there was aortic regurgitation, and a history of previous paresis and aphasia. The diagnosis was confirmed by the autopsy.

Presence of Mind.

A cool head is a prime requisite in a medical practitioner.

If you have a desperate case and only five minutes in which to adopt active measures for the relief of your patient, devote three of them to deciding what those measures shall be.

Don't allow yourself to be flurried or excited by the anxiety or entreaties of the family and attendants. It is very difficult, particularly in the case of young men, to remain cool and calm in the presence of emergencies, but it is the imperative duty of the medical man, and presence of mind and readiness of resource can, like all other faculties of the mind, be largely increased by cultivation. The stake involved is often the life of the patient, a responsibility which should be sufficient to nerve any man who undertakes to practice medicine.

The founder of journalism and dispensary practice was Theophraste Renaudot; a physician of Paris during the time of Richelieu. He founded the Gazette de Paris by printing some of his letters for the diversion of his patients. Like most other physician journalists, he died in poverty.

Therapeutics of the Ear.

Don't lose sight of the fact that the auditory canal and external surface of tympanum is not an absorbing surface. If you do, you will often be disappointed in the effect of agents prescribed to be dropped in the ear. The lining of these parts being a continuation of the skin, it does not possess the absorbing properties of mucous membranes, and agents are sparingly, if at all, taken up. If there be an exception it is with the combination of atropia and cocaine—one grain of the former and six of the latter in two drachms of water. This should not be used, of course, where a perforation of the drum is known to exist or where an otorrhea would suggest a perforation, as an excessive quantity might find its way to the throat through the eustachian tube. Six or eight drops of this solution instilled warm into the ear often relieves pain to a marked degree. As a rule, however, absorption of remedies in the auditory canal is so limited as to make their use very unsatisfactory.

Alcohol.

While the use of alcohol is always injudicious and injurious, it is particularly so in summer when the system is predisposed to disturbances of the gastro-intestinal tract.

Alcohol flushes the capillaries of the mucous membranes just as it does the capillaries of the skin, and where there is already a smouldering congestion, it will take but little to light the fire of acute inflammation, which will rage with greatly increased intensity.

It is wiser to habitually avoid even the medicinal use of alcohol, as there are plenty of other stimulants which will give the desired result without entailing any disastrous after effects.

The government of India gives a reward for the killing of venomous snakes. The result is that in many places these snakes are bred for the sake of obtaining the reward, and so the number of fatalities increases. In 1891, 21,389 persons were killed by snakes.

It is the custom in Great Britain for those desiring to introduce to the medical profession some new product, or instrument, or book, to send the same to the medical journals, which in turn have them examined by experts and publish the report on the examination.

Hot Water Drinking.

There are four classes of persons who should not drink large quantities of hot water. These are as follows :

1. People who have irritability of the heart. Hot water will cause palpitation of the heart in such cases.
2. Persons with dilated stomachs.
3. Persons afflicted with "sour stomach."
4. Persons who have soreness of the stomach, or pain induced by light pressure.

These rules are not for those who take hot water simply to relieve thirst, but as a means of washing out the stomach. Hot water will relieve thirst better than cold water, and for that purpose is not to be condemned. But hot water is an excitant, and in cases in which irritation of the stomach exists, should be avoided.

Notes.

Few physicians, who have practiced medicine five years, but have assured some patient relief, in the use of cod liver oil, only to see the patient sink lower and lower, from want of power to digest the remedy. Cod Liver Glycerine removes this difficulty; capable of being diluted with water, requires no digestion, but is a digestive stimulant. If you give Cod Liver Glycerine it will be assimilated. It combines readily in all prescriptions.

The Superintendent and Surgeon in charge of St. Louis City Hospital. Dr. A. Marks, announces that Cod Liver Glycerine is now used in that institution. Its power to mix uniformly in any proportion, in all prescriptions, or to mix with water and spirits without separating on standing, renders it the most desirable reconstructive in the convalescent period of difficult surgical cases, or acute diseases attended with emaciation; while its digestive properties insure its therapeutic action. †

There are at the present moment 131 ladies registered as students at the seven French medical faculties. Of this number, ninety-five are Russians, twenty-five French, four Roumanians, two Bulgarians, two Servians, one German, one Turk, and only one English. No one who has studied in Paris can avoid remarking the preponderance of the Muscovite element among these fair aspirants for medical honors.—*Lancet*.

Rectal Alimentation.

Huber has recently shown by actual experimentation, that from 58 per cent. to 70 per cent, of fluid egg albumen may be absorbed from the rectum without peptonization. A slightly larger proportion of albumen was absorbed after peptonization, but less than half as much when chloride of sodium was not added. The proportion of salt found necessary to stimulate absorption, was one gram, or one-fourth of a dram for each egg.

The treatment of the various diseases of the uterus and allied disorders has always occupied a large, and constantly increasing, portion of our reading pages in the various publications devoted to the medical profession, and no portion of the *materia medica* has a larger proportion of agents that have failed to answer the expectations of physicians than that devoted to the remedies to be used for the relief of suffering womankind. Among the many preparations advocated by their originators, or put forward by our manufacturing chemists, however, we have found one that has answered every call we have made upon it, a remedy that has stood the test of time, and is today constantly increasing its use among the progressive members of the profession. Caulocorea has been before the physicians of this country for a time to test its merits and effects in the treatment of the diseases of the female reproductive organs and the verdict has been uniformly favorable. Its formula is published and contains just those drugs which practical experience has shown to be the best for the conditions in which its use is recommended; it is a sedative and uterine tonic of great power. Caulocorea is indicated in dysmenorrhœa and threatened abortion, prolapsus uteri, engorgement, inflammation and induration of the uterus and kindred disorders, and is invaluable at puberty and the menopause. The Caulocorea M'fg. Co., of South Portland, Maine, have such well founded confidence in their production that they will send to any physician upon application a pound bottle of Caulocorea for clinical experimentation, and we can confidently advise that this offer be accepted.

A Necessary Precaution.

Never completely empty an overdistended bladder, nor aspirate all the fluid in a pleural cavity at one sitting.

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Collapse, with Vomiting and Diarrhœa.

Dr. Sturges (Lancet) reports a case of diarrhœa and vomiting in a child nine months old. The little patient was collapsed, and there was no longer hope of recovery. As a last remedy an intravenous injection of the following mixture was ordered: Twelve ounces of distilled water at a temperature of 101° F.; thirty-six grains of salt; one drachm cognac. The result was astonishing. The child reacted in a few hours. The vomiting occurred but once and the diarrhœa ceased. The child made a perfect recovery.

Chemical Food is a mixture of Phosphoric Acid and Phosphates, the value of which physicians seem to have lost sight of to some extent, in the past few years. The Robinson Pettet Co., to whose advertisement we refer our readers, have placed upon the market a much improved form of this compound, "Robinson's Phosphoric Elixir." Its superiority consists in its uniform composition and high degree of palatability.

Doctor—"Well, Dennis, did you take the pills I sent you?"

Dennis—"Indade, doctor, an' I did not; ye wrote on the box 'One pill three times a day,' an' I've been waitin' till I see you to ask you how a man was to take a little bit av a pill loike that three times in wan day?"—*Harper's Weekly*.

Removal of the Ovaries.

A study of the effects of removing the ovaries shows that for some time there are menstrual molimina, and the ordinary signs of the climacteric appear. The deposit of fat in the abdominal walls, buttocks and other parts of the body is attributed not to excess of nutrition, but to vaso-motor changes. When the uterus is removed and the ovaries left behind, the latter do not atrophy, as has been claimed, but subsequent autopsies have shown them unchanged in size, and containing Graafian follicles ripening or breaking.

Immunity Against Diphtheria.

Bardach has recently shown (Wratch, No. 6), that the serum of dogs, rendered immune by repeated inoculations, may be used for rendering immune the rabbit, the guinea pig and the mole. It may also be used curatively, the infected animals being inoculated by subcutaneous injections of dog serum, it is found to be perfectly innocuous.

Cocaine.

A French writer reports that in treating a case of cracked nipple with one in fifty solution of hydrochlorate of cocaine, he found that the secretion of milk was stopped by the application. The breasts became flaccid, and the nipples lost their erectility. The functional activity of the breast was restored on discontinuing the use of cocaine.—*Brit. Med. Jour.*

For Delirium Tremens.

R	Fl. Ext. Digitalis.....	ʒj.
	Hydrate Chloral	ʒij.
	Neurosine.....	ʒiv.
M.	Sig. Tablespoonful repeated as necessary.	

We are informed that it costs the people of the United States each year, to be born, \$25,000,000 ; to be married, \$300,000,000 ; and to be buried, \$75,000,000 ; while to get drunk the people pay \$900,000,000. 'Tis also said that this bill for drunks is larger than the bill for all the bread and meat consumed by the same people.

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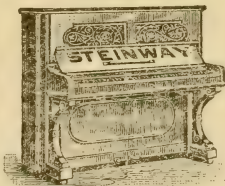
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Fig. 1.

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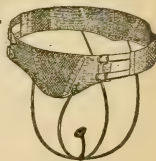


Fig. 4.

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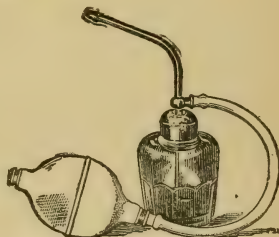
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Anæsthetics in Labor.

In the *Northwestern Lancet*, Dr. A. B. Cates, of Minneapolis, contributes a paper upon this subject, which he read before the Hennepin County Medical Society. He discusses briefly the advantages and disadvantages of anæsthesia in the practice of obstetrics, and thinks that of its advantages in properly selected cases there can be no doubt. A condition of acute anæmia produced by exhausting loss of blood is a decided contra-indication for both chloroform and ether. The writer has seen one death from ether, carefully administered for the evacuation of a uterus containing decidua of an abortion, when the heart appeared to be perfectly healthy. The previous loss of blood must have been very considerable, with comparatively empty blood-vessels. The absorption is overwhelmingly rapid.

Of the use of ether for obstetrical anæsthesia, he has no experience. It is open to the same objections as chloroform in regard to inertia and post-partum hemorrhage. It is not so readily absorbed nor eliminated, and more care is necessary in regard to fire. One of its disagreeable after-effects is also the establishment of lactation twenty-four to forty-eight hours later than normal, and babies are more liable to be colicky after the first few nursings.

Again, ether cannot be used for relief of pain for so long a time as chloroform, as it is not so readily eliminated, and after long-continued use becomes a depressant.

Chloral should not be passed without its portion of praise. During the first stage, where the pains are irregular or spasmodic and the os not readily dilatable, its effect is very satisfactory. The best method of administration is in doses of 15 grains, repeated in from twenty to forty minutes, if necessary.

It is contraindicated in diseases of the stomach and heart, being especially dangerous in the latter affections.

Bromide of ethyl and cocaine have not been of sufficient benefit to claim any continued use or recognition in obstetrics.

The Medico-Chirurgical College of Philadelphia has just received \$100,000 for a new hospital. Jefferson Medical College and the University have already had their hundreds of thousands from the State treasury, with doubtless more to come in future years. "This is a way we have in Old Pennsylvania."

The Treatment of Certain Forms of Fracture.

Phels (New York Medical Journal, vol. lviii, 1893), in a general discussion upon the treatment of fracture, strenuously insists that there is possibility of imperfect union, and holds that usually the danger can be averted by sufficiently early recognition and adequately careful treatment. If firm, accurate, undeviating, and persistent coaptation be made, osseous union will seldom fail in uncomplicated simple fractures. If in fractures of the shaft of the humerus the elbows were always properly supported; if in fractures of the shaft of the femur the fragments were always properly reduced; if all fractures, after the application of proper retentive apparatus, were left without unnecessary disturbance, the opportunities for study in the field of ununited fractures would be seriously curtailed.

In operation for ununited fractures the choice lies between drilling, wiring, and resection of the ends of the fragments, and of these the former is the one to be preferred in suitable cases. In case of failure, drilling will not prejudice the resort to other measures. The femur is of all bones least suited to its employment. In case by any chance purulent inflammation follows, it is liable to be diffused along the muscular planes, and to involve loss of limb, or even life itself. With one such accident the author is familiar, though the patient ultimately recovered.

For Sciatica.

Dr. Charles B. Lawrence (Am. Pract. and News) says of an intractable case of sciatica, that finally nitro-glycerine was given in alcoholic solution of one per cent. strength, commencing with a dose of one minim three times a day, gradually increased up to five minims. Improvement was almost immediate, and in ten days the patient was able to walk to his work. A complete recovery ensued.

The London Lancet says that a well stored mind and generally educated brain are indispensable preliminary conditions of the highest professional excellence. "A man of well improved faculties has the command of another's knowledge; a man without them has not the command of his own."

Lister's Renewed Allegiance to Carbolic Acid.

It is not surprising that those who have kept pace with the progress of antiseptics to hear Sir Joseph Lister, after twenty years of investigation and experiment, declare his renewed allegiance to carbolic acid, as he did in a lecture January, 1893, at Kings College Hospital in London (*Annals of Surgery*), June, 1893.

Carbolic acid is not only a more efficient surgical germicide than corrosive sublimate, but it is much more efficient in cleansing the skin. It has a powerful affinity for the epidermis, penetrating deeply into its substances, and it mingles with fatty materials in any proportion. Corrosive sublimate, on the other hand, cannot penetrate in the slightest degree into anything greasy; whence those who use it require elaborate precautions in the way of cleansing the skin. All of this is unnecessary with carbolic lotion. Sir Joseph does not even use soap and water, trusting entirely to the carbolic acid.

There is a new product of phenol and boracic acid, in which has been mitigated the pungency of carbolic acid, disguising its odor, and greatly supplemented its efficiency by its combination with boracic acid, which, although admittedly slower in its action, is nevertheless unsurpassed as a true germicide.

Treatment of Hydrocele.

In a late issue of the *Brit. Med. Journal*, Dr. Hall reports the successful treatment of nineteen cases of hydrocele by an extremely simple operation. The operation consists in sitting up the scrotum and tunica vaginalis, evacuation of the fluid, when the tunica vaginalis is sewed to the outer skin and a dressing of carbolized oil applied at a single sitting.

"Is the doctor in?" asked a tramp at the door of an Arch street physician recently.

A few minutes later an oldish female came to the door.

"I jist wanted to see if the doctor would'n give me a pair of his old pants," said the tramp.

"I'm the doctor," replied the lady.

The tramp had several attacks of vertigo as he dropped down the steps.—*Philadelphia Record*.

The Dangers and Avoidance of Ergot in Obstetrics.

In the Columbus Medical Journal for May, 1893, Crosslands has an article upon this subject, in which, after quoting his own experience and the instructions given by the standard text-books, he reaches these conclusions :

Ergot is extensively used to prevent an imaginary danger. In cases where its use seems most indicated, better results are obtained without than with it.

Its positive action blinds us to its possible dangers. The evil it does is often credited to other causes.

Administered, it is a potential force over which we have little or no control.

When the natural forces are insufficient, there are other means which are efficient, harmless, and controllable.

When all other means fail, forceps is the final resort for delivery through the natural passages.

The Predominance of Fallopian Tube Disease on Left Side.

Dr. F. Byron Robinson (N. Y. Med. Jour.) finds that the lumen of the left fallopian tube is larger than that of the right. This fact, he thinks, together with a restless rectum, a loaded sigmoid flexure resting on the left ovarian vein, the opening of the vein at the right angles into the left renal vein, and the greater size of the left pampiniform plexus, accounts for the greater frequency of pelvic disease on the left side in women. He finds valves in the left ovarian vein in about two-thirds of the bodies he examines. The size of the lumen of the left tube, he thinks, facilitates the admission of septic material.

Burns.

Children often suffer from burns, bruises, cuts, and blisters. Many times a good salve is needed in the nursery or for the school children ; but there is none at hand, and much suffering results from neglect to heal sore places quickly. A good salve is prepared by melting together an ounce of beeswax and an ounce of sweet oil. Allow it to become almost cool, then add an ounce of spirits of turpentine, and mix well together.

How Should the General Practitioner Deal with Strangulated Hernia ?

Gerster (Boston Medical and Surgical Journal, July 20, 1893,) holds that the conduct of the general practitioner in dealing with a case which may possibly be, or is, strangulated hernia, should be regulated in accordance with the following rules :

1. In cases of uncertainty give the benefit of the doubt to the assumption that an obscure tumor of the groin is a hernia.
2. Be gentle in attempting taxis, and do not spend too much time over it.
3. Be thoroughly aseptic in herniotomy, and divide the constricting bands freely, not with the probe-pointed knife cutting from within outward, but with the scalpel under the guidance of the eye, from without inward.

Sennine, the New American Antiseptic, Non-Poisonous, Non-Irritant, Odorless, is a Product of Boracic Acid and Phenol.

Convenient, inexpensive, applicable in powder form, and dressing. One ounce dissolved in boiled water makes one quart of liquid of proper strength.

Externally, five parts of Sennine dissolved in 100 parts of boiled water, will be of desirable strength for an antiseptic surgical wash, and for the treatment of catarrhal affections of the mucous membrane of all parts of the body. An excellent dressing for burns, scalls and sores is obtained by mixing one part with ten parts of Vaseline.

Internally, one to five grains of Sennine three or more times a day, is a powerful remedy in fermentative dyspepsia, typhoid fever, cholera infantum, cholera Asiatica, (especially as a rectal injection, five per cent.), and other fermentative diseases of the stomach and bowels.

Furunculosis.

In order to prevent the development of crops of boils, in the back of the neck and nose, persistently rub the region attacked with some fatty substance, as cold cream, unsalted butter or lard. The development of boils is due to dryness of the skin, and by inunction of a fatty substance the dryness is removed and the penetration of micro-organisms prevented.

The Treatment of Vulvar Vegetations by Pure Carbolic Acid.

Derville, of Lille (*Journal de Medecine et de Chirurgie Pratiques*, tome lxiv, 64 annee, 4 series), treated a case of vulvar vegetations covering both the anus and the vulva, and reaching the size of a man's fist. He cured this enormous growth by local washing with pure carbolic acid. The whole surface of the vegetations was painted with the pure acid; this application was repeated about every fourth or eight day. The treatment occasioned no pain, but frequently caused erythema, vesiculation, and excoriation of the surrounding parts. This is prevented by the application of vaseline to the healthy skin.

Legislation.

The law and its interpretations are things that to the ordinary intellect must be numbered among the inscrutable mysteries. The Doctor of Hygiene says that the *Post Graduate Journal* was refused permission to send out a large edition at second class rates, while *Merck's Bulletin*, an advertisement whose claim to be considered a medical journal is too flimsy to deceive a baby, is permitted to send out huge sample editions month after month in succession. This is one of the ways the Post Office Department has of encouraging legitimate medical journalism.—*Times and Register*.

To Preserve Steel Instruments from Rust.

In order to preserve steel instruments from the destructive influence of rust, one may place a few pieces of the chloride of lime into a funnel, the end of which rests in a bottle to catch the liquefying salt. The chloride of calcium has a remarkable affinity for moisture and a few pieces will preserve a cabinet of instruments from rust for several months.—*Le Bulletin Medical*.

The Doctor's Advantage.

"Cadley yawned awfully while Dr. Hicks was telling that story last night."

"I know, but the doctor got even with him. Sent Cad a bill for inspecting his throat."—*Harper's Bazar*.

Highland Water

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Is the Best Tonic, Diuretic, Eliminative and Solvent of Uric Acid.

1. Because it is the softest and purest water known, containing no excess of mineral salts and no lime or organic impurities, being therefore non-irritating to the digestive organs and kidneys.

Dr. G. THIN (British Medical Journal, vol. ii, 1891, page 91) states that the consumption of water containing lime brings about the development of gouty conditions; no doubt it acts in the same way as the contamination of the water by lead.

2. Because it contains Iron in combination with the alkalis, Sodium and Potassium in small quantities, as recommended by Profs. Flint, Thomson, Draper and others.

3. Because it comes from a region free from malarial germs.

4. Because all its mineral salts, and five of them in the exact form given in its analysis, are found in the human blood, of which they form a most essential part.

Analysis.—Each gallon contains:

Carbonate of Iron	1,100 grs.
Oxide of Iron.....	0,310 "
Chloride of Sodium.....	1,000 "
Sulphate of Soda and Potash	0,310 "
Carbonate of Soda and Potash.....	0,831 "
Carbonate of Magnesia	1,230 "

4,781 "

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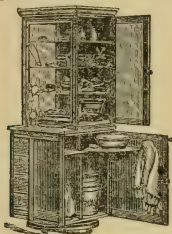
(Antipyretic and Analgesic) is useful in Neuralgia, Typhoid Fever, La Grippe, Sciatica, Acute Rheumatism, Hemicrania and allied affections. It reduces Temperature and relieves pain, without subsequent ill effects. Price per ounce, 25 cts.; per 100 tablets (5 gr.) 50 cts. Samples of above sent on application to

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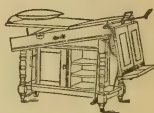
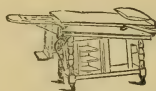
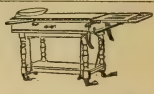


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Everything in Clothing, Hats and Furnishings,

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A Newspaper Tirade Against Medicine.

Nowadays it is rare to encounter such venom and such dense ignorance as are displayed in the following editorial article, entitled "Foes to Progress," which appeared in the St. Paul Daily Globe for September 10th :

"The recent session of the World's Medical Congress, at Washington, if remarkable for nothing else, was remarkable as a display of the ignorance that exists among physicians of the human system, the ills that afflict it, and the proper remedies for these ailments. Disease was discussed in all its thousand forms, and remedies for some afflictions were suggested, but it is a little singular that in no instance was any remedy for any given disease recommended, save as an experiment. The doctors were honest enough to admit, tacitly, at least, that they had no specific in the entire materia medica for any given complaint. Some drugs were found to have a specific action in a few instances, but utterly failed of producing the desired results in others. The most that could be done was to advise that physicians experiment with this or that drug. It might cure the patient, but no guarantee was given that it would not kill him. Nothing could more thoroughly explode the notion that medicine is a science than the confessions of the doctors assembled at Washington.

"Of all the so-called learned professions, that of medicine is the least progressive. There exists in the mind of every graduate of a medical college an overpowering dread of innovation. The remedies of a hundred years ago are the remedies of the present time, and the mode of administering them is substantially the same. Innovations are frowned upon by 'the fathers,' and progress is denounced as empiricism. The discoverer of a new remedy is denounced as a quack, and all countenance is withdrawn from him. The physician who tramples upon the traditions of the profession treads upon the corns of every other practitioner, and if he persists in discarding text-books that have grown musty with age, and precedents that were established in a by and forgotten era, he is expelled from association with his fellows. If he makes a discovery of value to suffering humanity; he must use it in secret, for if he thinks to benefit mankind by divulging it, he is confronted by the inexorable fiat of his fellows—"the ethics of the profession"—and

sooner than suffer ostracism he concludes that it will be wise to join the procession—a procession that never moves, but is rooted in prejudice, bound securely by precedent and tradition, and is scarcely in hailing distance of the present century.

“Meanwhile the march of disease and death is on us. Every year new diseases and new complications of old diseases manifest themselves. Remedies are sometimes found, and if they are consistent with the practices of the past they are adopted. If, however, they are repugnant to precedent, the patient dies, for few physicians have the hardihood to apply a new remedy. The cholera, the yellow fever, scarlet fever, and diphtheria have been carrying off thousands of victims every year for generations. They are almost as fatal to-day as any time in their career, for no remedy has been found and applied. They have been somewhat mitigated in severity by the observance of sanitary and hygienic precautions, but these have not been at the suggestion of the doctors. The grip comes around periodically, and, although tens of thousands have fallen victims, the doctors confess themselves powerless to combat it. Their experiments result in nothing of benefit; their diagnoses differ; their remedies are applied in a haphazard, hit-or-miss manner, and the undertaker gets a job. Scarlet fever is taking on new aspects of late years, caused, doubtless, by changes in the manner of living and in natural conditions. The treatment, however, remains the same—as inflexible as the laws of the Medes and Persians. Diphtheria is growing alarmingly prevalent and fatal. The remedies applied seldom reach the seat of the disease, and the patient only recovers if he is so fortunate as to have an extraordinary constitution.

“And so it goes. Disease strides far faster than those who combat it. Medical colleges increase rapidly, and grind out doctors by the score, each batch less skillful and less progressive than its predecessor. Humanity suffers, but the ethics and traditions of the profession must be maintained.”

An esteemed correspondent who sent us this gem says of it that it is evidently a comment on the Pan-American Medical Congress, although the writer calls it the World's Medical Congress, and adds that “one would judge that the writer had failed in introducing some pet patent or proprietary remedy or instrument at the congress, and had ‘got it in for’ the entire medical profession.”—*N. Y. Med. Journal.*

The Influence of Chloroform upon the Course of Normal Labor, as Shown by the Tachydynamometer.

Donhoff (Archiv. fur Gynachologie) administered chloroform in various degrees to five cases of normal labor, and noticed its influence upon the expulsive force of the uterus and abdominal muscles, as shown by a carefully constructed physiological apparatus. The conclusions reached are in substance the following :

1. The administration of chloroform, even in diminutive doses, exercises a retarding influence upon the progress of labor. The muscular pressure sinks to one-half of the amount of that present before the administration of the anæsthetic. In eight observations the average figures were 1,837.

2. The expulsive force of the uterine contractions steadily diminishes during the exhibition of chloroform.

3. The labor pains, besides being weaker, are also more irregular during slight anæsthesia. During deep anæsthesia the intervals between the pains are longer, and all the pains are diminished in strength.

4. The pains increase immediately after discontinuing the anæsthetic. The expulsive force of the contractions after stopping the chloroform, compared with the force just before its administration, is, as expressed in figures, 2-3.

5. The labor pains generally continue diminished in power for some time after discontinuing the chloroform. In one case they had resumed their normal intensity in ten minutes, while in two other cases two hours had expired.

6. If the action of the abdominal muscles is only slight; this action is checked entirely by a superficial anæsthesia, but soon reappears after the stopping of the chloroform.

7. The action of the abdominal muscles continues, but in diminished force, during superficial anæsthesia, if before the exhibition of the chloroform it was vigorous in character.

8. Deep anæsthesia abolishes entirely the action of the voluntary muscles.

9. The intervals between the pains become longer immediately after chloroform is administered, and the labor pains besides being less intense, decrease in numbers about twenty-five per cent.

These carefully conducted experiments show that chloroform, no

matter in what degree it is administered, exercises a retarding influence upon the progress of labor. The expulsive forces are lessened, and there is no corresponding diminution of the resistance.
Abstract.

The Complexion and Cracked Nipples.

Dr. Alice MacLean Ross calls attention to a certain relation existing between complexion and laceration of the perineum and cracked nipples. She says: In red-haired women and those brunettes who have red lips, red cheeks, and are inclined to freckle rather than to tan, lacerated peritoneum and cracked nipples occur most frequently. And those sallow-skinned blondes who tan rather than freckle, and who have a tendency to a deposit of pigment in the areola of the nipple, about the neck and armpits, are least liable to suffer from these accidents. The first class seem to have friable tissues and thin skin, and the second tough muscle and thick skin. Other women are liable to suffer or able to resist as they lean toward one type or the other. The relation is to me marked, and is of value in prophylaxis.—*Med. and Surg. Reporter.*

Corrosive Sublimate in Typhoid Fever.

M. Loranchet says that corrosive sublimate taken internally gives rise to none of the toxic effects usually attributed to the use of mercury; it is well tolerated. It is easily administered and does not interfere with other methods of treatment. It appears to destroy the action of pathogenic ferments, and to put a check to an over-elevation of temperature, so that cold baths may be dispensed with. It seems, moreover, to decrease the contagiousness of the disease and, according to the author, it has given a sufficient number of cures to place its efficacy beyond doubt.

Atonic Dyspepsia.

Charles K. Gardner, A. M., M. D., Huntington, W. Va., says: In atonic dyspepsia, associated with gaseous formation and acid eructations, foul breath, etc., Listerine has proven an agent of intrinsic value. I prescribe it freely in dysenteries and diarrhœas of children due to fermentation and food decomposition, and find its results unprecedented.

Miscellaneous.

Poisoning with Turpentine.

Carvete (Canadian Practitioner) has reported the case of a woman who at bedtime took half an ounce of old spirits of turpentine mixed with an ounce of whiskey, in mistake for castor oil. The mistake was only noticed after the turpentine had been swallowed, but nothing was done at the time except to take a dose of castor oil. The patient shortly afterward fell asleep, but was awakened in the course of five hours with sickness of the stomach. A little later she vomited, and after the lapse of several hours more she had a convulsion, followed by loss of consciousness. The pulse was weak, feeble, rapid; the face and lips pale; the patient restless, at times delirious and talking incoherently, but capable of being partly aroused. Urine had been passed in generous quantity. Whiskey, spirit of nitrous ether, milk and sweet oil were given, and warmth was applied to the body. Vomiting was induced by irritating the fauces. The vomited matter had a strong odor of turpentine ten hours after the fluid had been taken. After free vomiting, consciousness was regained and complaint was made of a burning pain in the right leg. Examination disclosed the presence upon the posterior aspect of the knee of a blister five by twelve inches in extent, the contents of which were watery and emitted an odor of turpentine. Gangrene of the superficial parts took place in this area, and fifteen weeks elapsed before the resulting ulcer healed.—*Med. and Surg. Reporter.*

Threatened Abortion.

R	Tinct. Opii Deod	60	minims.
	Sodi Bromidi	3	drachms.
	Chloral Hydrate.....	1½	drachms.
	Syr. Acacie.....	1	ounce.
	Aquæ.q. s. ad.....	3	ounces.

℞. Sig. A dessertspoonful in water every four hours.

Liniment for Rheumatism.

Oil of wintergreen and olive oil mixed in equal parts and applied externally will give almost instant relief from pain. On account of its pleasant odor this liniment is very agreeable to use.

Nature's Anti-Fat Remedy.

We do not know that the extreme heat of summer will directly cause an absorption of the anti-fat of the body, yet if there is ever an excuse for the loss of flesh it ought to be at such a time as this. It seems, therefore, out of place to mention any kind of an anti-fat remedy other than a temperature of 100 degrees in the shade. However, if any of our readers prefer the cool breeze of the mountains, and at the same time are heavily burdened with adipose tissue, we cannot do better than recommend to them Phytoline (Walker), the anti-fat remedy of the day. We cannot give the philosophy of its action, but the clinical reports indicate that it is a drug capable of accomplishing what is claimed for it.—*Extract from "Food."*

The Danger Line in Anæsthesia.

From the Reports of the Clinical Society of Louisville, as published in a recent number of the Medical and Surgical Reporter, we glean the following interesting statements. Dr. Kynett, of Philadelphia, called attention to this valuable sign as the danger line in anæsthesia: when the addition of fresh ether to the cone fails to produce an up and down movement of the wind pipe the ether should be withdrawn; when that movement occurs, the condition is a safe one.—*National Medical Review.*

Rectal Catarrh.

Dr. Strizovere reports "that chronic rectal catarrh can be promptly relieved by irrigating the rectum with a solution of carbolic acid, in the proportion of one-half drachm to a pint of warm water; this is to be repeated morning and evening, being retained about ten minutes each time. Within a few days decided improvement is noticed, and cures have been reported where the disease was of many months' duration."

Seminal Emissions.

R Peacock's Bromides..... 2 ounces.
Tinct. Ferri. Chlor..... ½ ounce.
Aquæ Puræ 1½ ounces.
M. Sig. One or two teaspoonfuls in water one hour after meals and at bed-time.—*Southern Med. Record.*

######



The Demand For

a pleasant and effective liquid laxative has long existed—a laxative that would be entirely safe for physicians to prescribe for patients of all ages—even the very young, the very old, the pregnant woman, and the invalid—such a laxative as the physician could sanction for family use because its constituents were known to the profession and the remedy itself had been proven to be prompt and reliable in its action, as well as pleasant to administer and never followed by the slightest debilitation. After a careful study of the means to be employed to produce such

A Perfect Laxative

the California Fig Syrup Company manufactured, from the juice of True Alexandria Senna and an excellent combination of car-

minative aromatics with pure white sugar, the laxative which is now so well and favorably known under the trade name of "Syrup of Figs." With the exceptional facilities, resulting from long experience and entire devotion to the one purpose of making our product unequalled, this demand for the perfect laxative

is met by Our Method

of extracting the laxative properties of Senna without retaining the griping principle found in all other preparations or combinations of this drug. This method is known only to us, and all efforts to produce cheap imitations or substitutes may result in injury to a physician's reputation, and will give dissatisfaction to the patient; hence, we trust that when physicians recommend or prescribe "Syrup of Figs" (Syr. Fici Cal.) they will not permit any substitution. The name "Syrup of Figs" was given to this laxative, not because in the process

of Manufacturing

a few figs are used, but to distinguish it from all other laxatives, and the United States Courts have decided that we have the exclusive right to apply this name to a laxative medicine. The dose of

"SYRUP OF FIGS"

as a laxative is one or two teaspoonfuls given preferably before breakfast or at bed time. From one-half to one tablespoonful acts as a purgative, and may be repeated in six hours if necessary.

"Syrup of Figs" is never sold in bulk. It is put up in two sizes to retail at fifty cents and \$1.00 per bottle, and the name "Syrup of Figs" as well as the name of the California Fig Syrup Company is printed on the wrappers and labels of every bottle.

CALIFORNIA FIG SYRUP COMPANY

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Parenchymatous Injections in Acute Inflammatory Affections of the Tonsils.

Occasional reports as to the beneficial effects to be derived from deep injections of powerful antiseption solutions in cases of infective inflammation of the tonsils have appeared certainly for the last ten years, but have attracted little attention, mainly because the physician or surgeon reporting such cases was so placed that his experience was necessarily limited, or was so little known that his conclusions, whether favorable or unfavorable, were not accepted by the profession at large. In the last few years, and particularly in relation to diphtheritic inflammations, these reports have been multiplying, and have been almost unanimously in favor of this method of treatment. Lately, Von Ziemssen, of Munich, strongly advocated these injections before the Twelfth German Medical Congress, held at Wiesbaden in April of this year. He called attention to the fact, long since known, that there is constantly found in the crypts and lacunæ of the healthy tonsil the micro-organisms of the common septic processes. As long as the epithelial lining of these follicles is intact these micro-organisms are innocuous; but when, from acute congestion incident to cold, or excited by the poison of scarlet fever, or occasioned by diphtheritic infection, this epithelial lining is broken through, or its normal resistance is greatly lessened, these micro-organisms penetrate into the substance of the tonsil and excite their characteristic virulent local and general effects. Von Ziemssen employs the carbolic solution recommended by Taubner and Heubner. In cases of catarrhal tonsillitis he injects about 8 drops of a two per cent. carbolic solution. The aching and the pain on swallowing disappear almost immediately, and the temperature quickly drops to normal. Usually one injection into each tonsil is sufficient to definitely stop the suppurative process; occasionally two are necessary. The effects of these injections were so constant, and the relief from the subjective symptoms so immediate, that this treatment must be regarded as truly abortive in its effect. The injections are readily made, occasion almost no pain, can be given by an ordinary hypodermic syringe, though they are more conveniently administered by means of a syringe provided with a long needle, and they never excite undue inflammatory reaction.

Von Ziemssen employed this method of treatment in all forms

of tonsillitis presenting themselves to him, including those incidents to scarlet fever and diphtheria. In all his general results were favorable.

Sahli, in commenting upon Von Ziemssen's statement, is entirely in accord with that author as to the favorable effects of the injection. While commending carbolic acid, he personally uses the iodine trichloride, preferring this antiseptic on account of its powerful germicidal effect and its relatively slight toxicity.

Behring's experiments showed that, after infecting an animal with diphtheria, cure took place when the iodine trichloride was injected near the infected area. These experiments had weight in inducing Sahli to choose this remedy. He injects once or twice daily a two-tenths per cent. watery solution of the drug, driving it, a drop or two at a time, into various parts of the inflammatory swelling. In diphtheritic cases injections were made into and beneath the pseudo-membrane and into the underlying connective tissue. He states that, especially in diphtheria, the local and general amelioration of symptoms is frequently astonishing.

Heubner reiterates his opinion expressed seven years ago as to the good effects of this treatment. He states that he has employed the method for twelve years, and never had occasion to regret so doing. He has treated several hundred cases of scarlet fever in private practice, and in the last year and a half treated fifty-one cases in the hospital; twenty-two of these cases presented grave diphtheritic lesions of the throat; fifteen of these throat cases were cured. Usually about fourteen of the injections were necessary before final cure took place. In one case unusually severe thirty-five injections were necessary.

He states that these injections are more easily applied than either gargles or paintings of the throat, and that, beyond a slight burning, no pain is occasioned.

Von Ziemssen and his colleagues have probably given this method of treatment the strongest endorsement it has received, and as a result of their teaching it will no doubt be employed more frequently than ever before. That the results cannot always be successful need scarcely be said. Indeed, it is difficult to explain why any success whatever should follow these injections, since sections of tonsils show that in many cases, if not in the majority, there are multiple foci of suppuration, and that in severe cases in-

fection is spread wide of the tonsil itself. Even when there is a single focus of infection which has advanced so far that distinct symptoms are excited, it is only by luck that a small amount of injection could be driven into it, and even when this takes place it is hard to understand how this injection can destroy all the germs in and about this focus. On the contrary, it seems reasonable to suppose that, as a result of inflammatory reaction, the extension of disease would be even more active than before the treatment. Still, proof is more positive than theory, and this method of treatment has been advocated by careful men, whose reputations for scientific accuracy are world wide. Again, similar methods of treatment have been successful in the management of lymphatic glands in other parts of the body, viz., the iodoform injections in the treatment of tubercular adenitis, and the benzoate of mercury injections for the cure of bubo. It is a method worthy of trial, but it must be borne in mind that prompt subsidence of beginning acute tonsillitis should not necessarily be attributed to the treatment, since spontaneous resolution is by no means uncommon.—*Therapeutic Gazette.*

Text Book of American Gynæcology.

Mr. W. B. Saunders, Publisher, etc., of Philadelphia, Pa., announce this work as ready for issue during September. It is the joint work of Drs. Wm. R. Bryor, Howard Kelley, Byford, Baldy, Tuttle, and others who stand before the profession for all that is progressive in gynæcology. The work will contain operations not before described in any other book—notably ablation of fibroid uterus. It is designed as a profusely illustrated reference book for the practitioner, and every practical detail of treatment is precisely stated.

Pregnancy.

Every pregnant woman should carefully protect herself, from the sixth month on especially, from taking cold, as then the kidneys are severely taxed.

Quinine.

Quinine is contra-indicated in congestion and inflammation of the stomach, brain, or genito urinary organs.

The Internal Use of Hot Water in the Treatment of Disease in Infants.

McConnell (Medical Record, June 17, 1893) reports the following interesting case, showing the value of this therapeutic measure:

He was called one morning to see a three-months old, bottle-fed child, and found it in convulsions. It was emaciated, and the convulsions were evidently due to the non-assimilation of its food. Previous to this, with the exception of a slight irritability of the stomach and bowels, it had appeared perfectly well to the parents. When the convulsions ceased it commenced to vomit and purge. It could retain no kind of nourishment, not even cold water, and medicines did no good. As a last resort, the reporter ordered all the hot water the child could take, given through a nursing bottle, and nothing else except a chloral and bromide mixture when the child was threatened with spasms, several of which it had since it was first seen. This was continued for twenty-four hours without any nourishment, the surface being sponged every two hours with cold water. It vomited the first bottle of the hot water, but retained the second, and had the most peaceful sleep it had had for a long time. The condition of the bowels gradually improved, and vomiting gave very little trouble. At the end of another twenty-four hours a teaspoonful of cream, lime-water, and water was given every hour, then egg-water, and finally, condensed milk. This was an extreme case, every one expecting it to die, yet it made a good recovery.

Another child, five months old, that had suffered from intestinal pain from birth, crying almost constantly unless it was nursing. It had some fever, the lungs were slightly congested and the bowels were hard and tender. Poultices were ordered and large doses of an opiate given, but it cried on. It refused the breast and did not like cold water. After ten hours the parents finally agreed to the administration of hot water. The child took it as if this were the very thing he had been crying for; he took it eagerly and in large quantities, and it gave him almost instant relief. He took little else for thirty-six hours, and it was the most important article of diet for one week. Since that time the child has had an acute attack of vomiting and purging, and the hot water has been tried again with the most happy effect.

Another child, five months old, well nourished, yet crying all the time except when nursing, was given the hot water between the nursing periods, and the remedy cured it completely, after pargoric, etc., had failed to give relief.

The importance, in all gastric and intestinal troubles in adults, of rendering the entire alimentary canal aseptic, "making it sweet and clean," is now almost universally acknowledged, and the results from this method of treatment in these frequent and distressing diseases have been so satisfactory that it encourages general adoption. Theoretically, nothing could be more rational, and practically the results have been beyond the most sanguine expectations. When the child is vomiting and purging, when its very life seems to be oozing away, there is an irresistible temptation to support life by giving nourishing food, yet experience has taught us that all food acts as an emetic or a purgative, and if it do not so act it is useless, the assimilative functions are suspended, and secretions and excretions are perverted. Hot water here is a stimulant, an antiseptic, a sedative and a food. Water will support life for a time, transfusion of saline solutions has rescued individuals from the grave, and if you will flush the stomach of the vomiting and purging infant with hot water for twenty-four hours, withholding all foods, and then, in small and easily-digestible quantities, at short intervals, give nourishment, you will very often rescue it from the grave. The writer commences with pure hot water, then adds salt, and, when necessary, sugar. The child will drink this with avidity, preferring it to the nurse, it will produce a quiet, peaceful sleep, and the extremities, that were previously cold and clammy, will become warm and natural. The above are only a few of the cases in which, and to which, it is adapted; in fact, McConnell thinks there are few diseases of infancy in which the use of hot water will not prove a valuable aid.

Number of Beds in the Hospitals of Different Cities.

New York, 11,000; Brooklyn, 2,000; Philadelphia, 6,391; Cincinnati, 3,000; Buffalo, 1,025; Albany, 447; St. Louis, 2,086; St. Joseph, 849; Kansas City, 516; Omaha, 617; Detroit, 762; Milwaukee, 667; Chicago, 4,684; Denver, 961; St. Paul, 522; Minneapolis, 325.

Malt Extract.

Extract of Malt is no longer an official preparation—at least it will very soon not be, as it is one of the dismissed articles from the Seventh Decennial Revision of the U. S. Pharmacopœia. Why this is “thusly,” when it is an article of so much therapeutic value and so largely used, it is not within our province to say. It looks to us as if the Revising Committee were either perfectly satisfied with the quality of the present commercial supplies, or that they despaired of describing or defining the product in such a way as to permit of easily applied tests for limitation and verification of the standard by the ordinary druggist. If the former supposition be the correct one, we surmise that Parke, Davis & Co.’s Extract of Malt was one of the brands on the market that they found to respond to every test, both as to diastatic strength and palatability.

There are extracts of malt which will scarcely effect the conversion of starch, but these we need scarcely say are worthless in the treatment of carbohydrate indigestion, although they may in palatability be perfectly acceptable. It is almost out of place to speak here of the many uses to which a good extract of malt may be put, but probably the most frequent occasion is in handling cases of ovarian troubles, with the very common indigestion accompanying, that of the starchy foods in particular. Extract of Malt (P. D. & Co.) will prove itself an efficient agent wherever the natural fluids are showing themselves to be unable to accomplish starch conversion, and its present high standard of activity in this direction may be depended upon even after the official guardianship of the Pharmacopœia is dissolved.

Painful Intestinal Catarrh.

Dr. A. G. Wollenmann, of Ferdinand, Ind., praises :

R. Emulsio amygdal,.....	℥ iiss.
Salol.....	℥ j.
Tinct. opii.....	℥ xxij.
Syrup. simpl.....	℥ v.

℥. Sig.: Tablespoonful every two hours.

To Make a Mustard Plaster.

For young children—Mix one teaspoonful of mustard and three of wheat flour with water to the consistency of a stiff batter, and apply between soft muslin cloths. For adults—one part of mustard and two of flour.

Gray's Anatomy, New (13th) Edition.

Another edition, the thirteenth, of this standard work is announced for early publication by Messrs. Lea Brothers & Co. It is hardly too much to say that this work has been the most popular of all medical text-books whatever since its first appearance in 1851. Its text has been revised successively by the foremost anatomists of a generation, and the present edition embodies whatever changes were necessary to make it represent its advancing science. The illustrations have always been noted for their clearness. Their large size has rendered it possible to print the names of the parts directly upon them, thereby indicating not only their names, but also their extent—a most important matter. A liberal use of colors has been made, to secure additional prominence for certain parts. Notwithstanding these improvements, the constantly increasing demand has justified a reduction in the price of the colored edition. An early review will appear in these columns.

Contused Wounds.

After a careful antiseptic cleansing, M. Reclus covers the wound with iodoform gauze impregnated with the following pomade :

R	Vaselin	3 iss.
	Acid. Boric	
	Salol.....	aa... gr. xlv.
	Antipyrin.....	gr. xlv.
	Iodoform.....	gr. xv.
	Hydrarg. Chlor. corr.....	gr. ¾.

—*El Siglo Medico.*

About October 15th a Medical Directory of the State of Connecticut will be issued by the Danbury Medical Printing Co., of Danbury, Conn. It will contain a list of all the various medical societies, all the dentists and dental societies, druggist and pharmaceutical societies, nurses and training schools for nurses, hospitals, etc. Price \$1, delivered free by post.

The brain of the late General Butler is said to have weighed sixty-two ounces. This places it very high in the list of historic and heavy brains. This list, leaving out certain hydrocephalic squaws and laborers, is: Cuvier, 64.5 ounces; Abercrombie, 64; Butler, 62; Spurzheim, 55.06; Diridelet, 53.6; Daniel Webster, 53.5.—*Medical Record.*

System of Medical Jurisprudence and Toxicology.

Messrs. Wm. Wood & Co., of New York, N. Y., announce the publication of such a "System," in four large 8vo pages (about 600 pages each), "as rapidly as they can be issued from the press." "Illustrated wherever desired by line and 'half-tone' engravings and chromo-lithographic plates." Sold by subscription only; muslin, \$5 per volume; leather, \$6. Edited by R. A. Wilthaus, A.M., M. D., Professor of Chemistry, Physics, and Hygiene, University of City of New York, and Tracy C. Becker, A. B., LL. B., Professor of Criminal Law and Medical Jurisprudence, University of Buffalo. With the collaboration of 17 associated authors, three of whom are legal and 14 are medical. The plan of the "System" is such as to especially adapt it to the courts of the various States of America. The obsolete in medical testimony is eliminated, and the most recent of scientific facts are incorporated to guide the doctor in giving testimony in all sorts of cases. Practically speaking, it is proposed that this work shall be so thorough as to supplant the requirement for any other text or guide-book for American practitioners of medicine or law.

Treatment of Cholera.

Dr. Chas. Gatchell, of Chicago, in his "*Treatment of Cholera*," says: "As it is known that the cholera microbe does not flourish in acid solutions, it would be well to slightly acidulate the drinking water. This may be done by adding to each glass of water half a teaspoonful of Horsford's Acid Phosphate. This will not only render the water of an acid reaction, but also render boiled water more agreeable to the taste. It may be sweetened if desired. The Acid Phosphate, taken as recommended, will also tend to invigorate the system and correct debility, thus giving increased power of resistance to disease. It is the acid of the system, a product of the gastric functions, and hence, will not create that disturbance liable to follow the use of mineral acids."

Send for descriptive circular. Physicians who wish to test it will be furnished, upon application, with a sample, by mail, or a full size bottle without expense, except express charges.

Prepared under the direction of Prof. E. N. HORSFORD, by the

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Price in one ounce cans (437½ grs.) 60 cents.

PHENA TRO CINE CHEMICAL CO., Philadelphia, Pa., U.S.A.

On Some Recent Uses of Phenacetine.

Professor Mays, in a late address before the Philadelphia Poly-clinic, referred to the value of Phenacetine in the treatment of asthma. He gave it in combination as follows: Rx. Phenacetine, gr. 54; quin. sulph., gr. 32; ammon. mur., gr. 90; pulv. caps., gr. 4; strychninæ sulph., gr. $1\frac{1}{8}$; F. capsules, No. 32. S. One capsule four times daily.

Dr. Mays said that the medicines should be taken in the evening, since asthma is nocturnal in its attacks, and the patient should be protected at night. Dr. Hunter Robb calls attention to the value of Phenacetine as a substitute for morphia in painful cases in gyn-ecological practice. He says (Maryland Med. Journal, May): "As substitutes for morphine, I would advise, wherever practicable, elec-tricity; internally, in guarded doses, gelsemium phenacetine; and as local applications, the cautery, oil of peppermint and oil of wintergreen."

Dr. Coit Taylor (Med. World, July, 1893) recommends the exter-nal use of Phenacetine for rheumatism. He write: "Rheumatic pains of the joints, pains from sprains, contusions or bruises—Rx. Phenacetine, gr. 15 to 20; sp. vine. rect; aquæ bul. aa 1 ounce; to be applied on cloths, as hot as it can be borne; or, Rx. Phenacetine, gr. 15 to 20; lanoline, 1 drachm; make into an ointment and apply by manipulations. Apply these when indicated and the results will be satisfactory." As a dry application to ulcerated surfaces, the value of Phenacetine is now widely understood.

Getting Practice.

"Why, doctor, I think you must be insane!" said Harry to a well known M. D., who was busy planting apple trees right against his front fence. "Why, the small boys will steal the fruit before it has a chance to ripen." "That's just exactly what I want," re-plied the M. D. "Green apples mean the colic, and colic means the doctor. See?"

A doctor in Pine Bluff, Ark., who is hardly twenty-one years of age, has done eleven laparotomies, all successful. This proves that the doctor is a very enterprising man; but what can be the matter with the Pine Bluff ovary?

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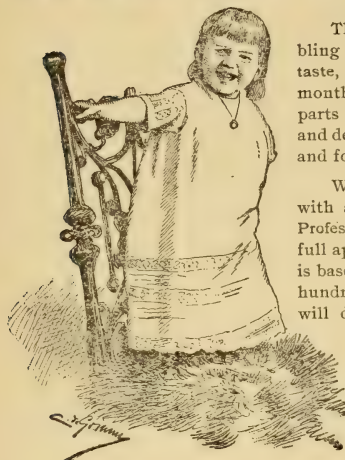
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We make the statement at the head of this page with a knowledge of the general opinion of the Profession in reference to artificial feeding, and a full appreciation of what our statement implies. It is based on personal observation and actual test in hundreds of cases, and we hope that no Physician will doubt this statement without verifying it by making a trial of our Infant Foods as now put up in hermetically sealed cans.

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More nutritious and more palatable than any Liquid Kumyss.

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What the Determination Was.

Inebriate—"Doctor, I think I've got a determination of blood to the head."

Doctor (regarding him critically)—"That isn't what ails you."

Inebriate—"What is it?"

Doctor—"A determination to get drunk."

Liquid Salol.

At a meeting of the Surgical Society, M. Reynier said: "At the temperature of 40° C. (104° F.) salol becomes liquid and may be injected into the subcutaneous cellular tissue. Salol mixed with iodoform is liquefied under the influence of heat, but the mixture solidifies when it cools. When a cavity is evacuated and liquid salol-iodoform is injected, the mixture remains liquid and causes the gradual evacuation of the pus which forms in the cavity. The liquid salol succeeds well in the case of fistulae. It is especially useful in the treatment of cavities in bones. When liquid salol-iodoform is thrown into the cavity, it solidifies and forms a permanent and hermetic antiseptic dressing." M. Reynier had caused union of the wound in laparotomy by means of liquid salol-iodoform.—*La Medecine Moderne*.

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R Salol. 10.0
 Acid Salicyl. 2.0
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 Acid Boric 40.0
 M. ft. pulv. Sig. Use as snuff every hour.—*Medical and Surgical Reporter*.

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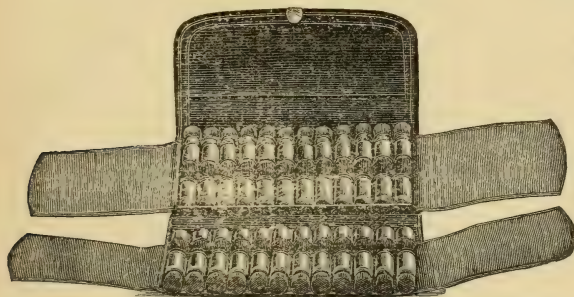
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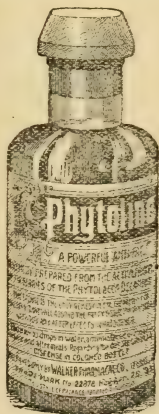
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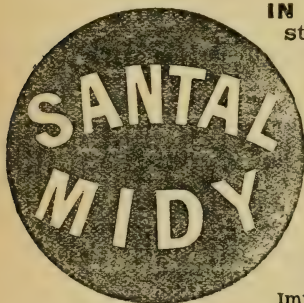
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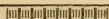
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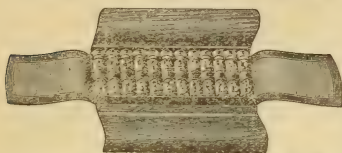
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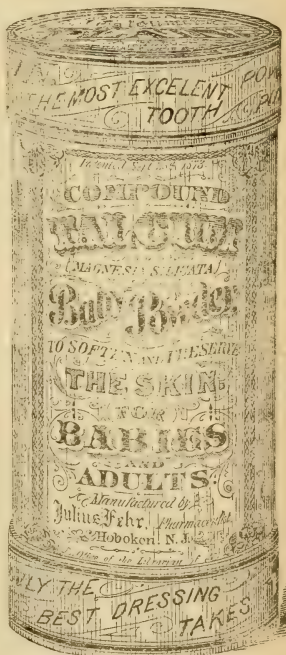
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Charlotte Medical Journal.

VOL. III.

CHARLOTTE, N. C., NOV., 1893.

No. 5.

Original Communications.

Typhoid Fever—Etiology and Treatment.

BY W. E. FITCH, M. D., GRAHAM, N. C.

Typhoid fever is an infectious disease, arising from specific pathogenic micro-organisms, which after having gained admittance into the body and found conditions favorable, grows and multiplies, and in so doing elaborates a chemical poison which induces its characteristic effects, and this micro-organism is the bacillus typhosus, described by Eberth, Klebs, Gaffely, Pruden and others. Clinically the disease is marked by fever, a rose-colored eruption, diarrhœa, tenderness in right illiac region, tympanitis and enlargement of spleen.

Etiology.—Typhoid fever prevails in temperate climates, and most often in the autumn months. It has been observed to prevail in hot and dry seasons. According to Pettenkofer, epidemics are most common when the ground water is low, under which circumstances the springs and water sources drain more thoroughly contaminated foci and are more likely to be charged with poison.

The poison in typhoid fever is not given off from the skin, or in the breath, but through the alvine discharges, and those persons who wait on the patient and handle the soiled body and bed linen, are most liable to contract the disease, but it rarely happens. Infected water is unquestionably the most common mode of conveyance. I have known an epidemic to originate from a contaminated spring, and another from a contaminated well, in Wake county. A picnic party went out from Raleigh some few miles to a grove to spend the day. There was an unused well near by from which most of the party drank water, a very few used water from another source. After this, every one who drank water from the well had typhoid fever, and not one of those who used other drinking water were sick.

A very striking epidemic occurred from contaminated water at Plymouth, Pa., in 1885 (Oster P. M., 1892). The town, with a population of 8,000, was in part supplied with drinking water from a reservoir fed by a mountain stream. During January, February and March, in a cottage by the side of and at a distance of from 60 to 80 feet from this stream, a man was ill with typhoid fever. The attendants at night were in the habit of throwing out the evacuations on the ground towards this stream. During these months the ground was frozen and covered with snow. In the latter part of March and early in April there was a considerable water fall and a thaw, in which a large part of these three months' accumulations of discharges was washed into the brook not sixty feet away. At the very time of this thaw the patient had numerous and copious discharges. About April 10th cases of typhoid fever broke out in the town, appearing for a time at the rate of fifty per day—in all about 1200 people were effected. An immense majority of these cases were in the part of the town which received their water from the infected reservoir.

Milk also may be the source of infection. One of the most thoroughly studied epidemics due to this cause was that investigated by Ballard, in Islington. The milk may be contaminated by infected water used to wash the cases. In fresh milk it has been shown that the germs grow rapidly.

Almquist (*Zeitschrift für Hygiene*, Leipzig, Oct. 1890) reports an epidemic of typhoid fever in one of the provinces in Sweden during the summer of 1889, originating from the milk supply. In the middle of the month of June typhoid fever suddenly appeared in a community of 3000 inhabitants. The cases were pretty widely distributed, but it was discovered that those attacked received their milk from the same dairy. It was also discovered that a woman living near the dairy had, since a month, been suffering with typhoid fever, and that a child in the same house had, a month earlier, been affected with some febrile disorder, in all probability of a typhoid nature. These two cases were, no doubt, the starting point of the epidemic. One hundred and four cases, with eleven deaths, occurred in less than three months.

CONTAMINATION OF THE SOIL.

Pettenkofer holds that the poison is not eliminated in a condition capable of communicating the disease directly, but that it

must first undergo changes in the soil, which changes are favored by the ground water; putrefaction of animal and vegetable matter will also produce typhoid bacilli.

P. Ernst reports a case (in *Centralblatt für Bakteriologie und Parasitenkunde*, Jena, Sept. 19, 1890) of a child being born prematurely of a mother sick with typhoid fever, which, on its fourth day of extra-uterine life, suddenly ceased its crying, became intensely jaundiced and covered with a mottled exanthem from the lower extremities to the lower portion of its abdomen. It died the same day. The autopsy revealed icterus, intense injection of the gastric mucus membrane and moderate acute enlargement of the spleen. Cultures from the spleen and from the blood of the heart showed in two days numerous colonies of the typhoid bacillus. Numerous bacilli were found in every arterial lumen of the Malpighian bodies of the spleen. Some days before the premature delivery the mother suffered an injury which possibly caused a lesion in the placenta, with passage of bacilli into the foetal circulation.

STATISTICS.

McDonald (Med. News, Philadelphia, Pa., Sept. 9, 1890) presents conclusions arrived at from a study of 100 cases of typhoid fever at Montreal General Hospital. He found the average age of patients 24.8 years. There were 16 fatal cases; the rose rash was present in 52 per cent. of cases. The average duration of non fatal cases was 40.8 days. Retention of urine occurred in 7 of the 84 non-fatal cases, and in 5 of the 16 fatal cases. Epistaxis was not serious in any case. Relapse occurred in but one case. Perforation was found in but one fatal case.

Statistics of cases of typhoid fever occurring in my own practice with four deaths I found epistaxis occurring in five cases; hemorrhage from the bowels and recovery in two cases; one death from perforation of bowels; retention of urine and recovery in three cases; rose-colored rash occurred in 63 per cent. of cases; severe and repeated hemorrhages, causing immediate death, in two cases; involuntary discharges from bladder and rectum occurred in two cases with recovery, and in one case that died. Average age 21.32 years. Headache present in 90 per cent. of cases; delirium in eighteen cases; relapse occurred but once and recovered; one death from complication with hypostatic congestion of lungs. Highest temperature revealed, ending in recovery, 104 1.5°; highest recorded and death, 108 1-10° F.

The first step in the treatment of typhoid fever that I take, provided the surroundings of the patient will admit, is to place the patient in a large, well ventilated apartment, and have all unnecessary furniture removed, and only the nurse and most intimate friends allowed in the sick chamber. Perfect quiet is always enjoined. For the reduction of fever—cold—by means of ice bags or bladders filled with ice—the cold coil, as frequently used by Prof. Loomis, cold pack, and cold sponging with hydrochloric acid, largely diluted in cold water, bay rum, witchhazel or apple vinegar, either and all are good, and very effectually reduce the temperature and at the same time produce a pleasant effect on the patient.

Drugs to reduce temperature in typhoid fever are too numerous to mention. As for myself, I use Acetanilid in 10 gr. doses. I am led to believe that quinine, antipyrine and the salicylates are harmful, if not dangerous, to use. Insomnia, when persistent, is best combatted by administering bromide of potassium in 10 gr. doses. Delirium, when mild, no treatment; when wild, push opium to senic drowsiness. Tympanitis, with dry tongue, Dr. H. C. Wood (in Med. News, Philadelphia, March 8, 1890) credits Geo. B. Wood with the original recommendation of turpentine in typhoid fever. There are two periods where its use is indicated—the first at the end of second week, when the tongue is dry and glazed; and tympanitis with or without diarrhœa. Dr. Wood recommends that the turpentine be given with glycerine in the following formula :

R	Ol. Terebinthinæ	f 3 ii.
	Glycerine.....	f 3 i.
	Mulc. Acacia.....	f 3 ss.
	Aquæ Menth. Pip, xs. add.....	f 3 viii.
M.	Sig. Tablespoonful every four hours during the day.	

The second class of cases, in which the value of turpentine has been asserted most positively by hundreds of clinicians of large experience, many of them men of the highest renown as therapeutists, is that in which marked dryness of tongue and tympanitis, develop in the end of the second week of the fever. The tongue sometimes instead of clearing off gradually from the tip and edges often parts with its fur quickly and in large flakes generally, first from the middle and back part of the dosum lingualæ, leaving a smooth glassy surface as if deprived of its profillar. If after this the tongue remains moist, a slow convalescence may be pretty confidently

prognosticated, but it often happens that during the process of cleaning off, or after its completion, the surface becomes quite dry, at the same time an increase of the tympanitis, perhaps an aggravation, or certainly no abatement of the other symptoms. In these cases Dr. Geo. B. Wood taught that the action of turpentine was of a local one exerted upon the ulcerated surfaces, and gave good reasons for his belief.

Believing as I do that turpentine acts locally, and that in all cases of typhoid fever ulceration certainly exists, that properly administered the drug is incapable of doing harm. I always begin its use in an emulsion with glycerine about the middle of the second week and believe the practice a good one. In Hemorrhages give opium enough to produce perfect quiet; Ergotole hyperdermically, mineral astringents and enjoin *perfect quiet*.

Evacuations, as soon as passed, should be disinfected with carbolic acid or persulphate of iron and buried. The bed and body linen should be changed daily and soaked and washed in chlorine water. For the gratification of friends it is sometimes necessary to give some placebo. Bismuth is a very good one, and acts as a disinfectant to the intestinal discharges, for abdominal pain and tenderness with tympanites. Turpentine *stupes* prepared by having two twine layers of flannel wrung out of hot water and a few drops of turpentine sprinkled on it and applied to the abdomen and covered with oiled silk or flannel. This local application is quite a successful mode of treating the symptoms above referred to.

Heart failure, a very frequent and one of the most serious complications with which the physician has to combat is most successfully treated with strychnine, given hypodermically in full doses. To support the patient is the main point of treatment after the end of the second week with dry tongue and tympanitis. Stimulation, assimilation and nutrition are the three roads we must travel towards recovery. Acidulated drinks from hydrochloric and sulphuric acids, or lemonade not too sweet. Typhoid patients will drink this and enjoy it, and tell you next day it has done them so much good. Stimulate with animal broths, milk, milk punches, egg-nogs, chicken soups and farinaceous foods, sparingly given, coffee with plenty of milk, and to the broths might be added a little brandy—good old apple brandy preferable. The foods should be given at regular intervals, and changed alternately so as not to tire

the stomach of any variety. The diet should be liquid almost entirely, or as far as practicable, and you can give as much nutritive food as the patient can assimilate. Be very cautious not to go beyond that, if you do it will do harm. Milk as an article of diet is the best, when your patient can take it and not get tired of it; but I find some patients who cannot drink it. Here I allow nice *fresh* butter milk administered with a little lime water. But if my patient can drink milk and not tire of it from continued use, I want nothing better for an article of diet. It is nourishing, easily assimilated and is nature's greatest food. Pulse less than 120 denotes strength, above 130 denotes feebleness and causes for stimulation. Begin with moderate quantities of wine, or good apple or French brandy in 3^{ss} doses. In these cases the tolerance of alcohol is better than in health, and many lives have been saved by their timely administration.

MANAGEMENT OF CONVALESCENCE.

I never allow solid food until the temperature has been normal for at least eight or ten days. I think this is a safe rule, leaning towards extreme caution; then I allow eggs, milk toast, milk puddings, jellies, &c. Many leading practitioners allow solid food as soon as patient desires it, but I had a *lesson* in this matter while I was a student in City Hospital, Baltimore. A man about twenty-eight years old was convalescing very nicely. I was quite interested in this case. Two weeks after his temperature had been normal, and a few days before his intended discharge, he ate several mutton chops, and within twenty-four hours was in a state of collapse and died from perforation. I assisted Dr. W. G. Keitle, pathologist, with the autopsy and found a small transverse perforation at the bottom of an ulcer, which was in the process of healing. Since this I have been very chary about solid foods at the beginning of convalescence. It was quite a lesson to me.

Constipation is quite common during convalescence, and is best treated by enemata. Among the danger of convalescence may be mentioned tuberculosis, which, as Murchison says, is more common after typhoid fever than any other fever.

And finally, I am fully persuaded that it requires as much good judgment to know when to withhold medicines in typhoid fever as it does to know when to administer them.

The Semiology of Insanity.

By EUGENE GRISSOM, M. D., LL. D., of Denver, Ex-Vice-President of the American Medical Association; formerly Superintendent of the North Carolina Insane Asylum.

There is a mysterious land, unlike any upon which the sun shines. Its realms are as vast as the bounds of space; its thrones grander than the kingdoms of earth; its palaces more resplendent than the dreams of Aladdin; its rivers flow with eternal music; its forests wave in more than tropical glory; its oceans roll with the primeval grandeur that engulfed the ancient continents; its skies shine with auroras, whose light and color the sunlight may not hope to rival.

Alas! there is close by a region of darkness profound; abysses of frightful depth; sounds and sights and fears of unimaginable woe; an unexplored home of spirit and demon and goblin dark, of spectres and all imaginable horrors. Here men walk all their days in leaden gloom, or sullen striving, or frantic rage against their fate. Beckoned on by a ghostly hand, they enter this the terrific plain of mania or melancholy, to march to a final grave within its caverns.

The former of these is the kingdom of *genius*, the latter is the habitation of *madness*. Between the two there lies a strip of unknown breadth, which we may term the border-land of reason. Here narrow, there wide-stretching and peopled by adventurous spirits who, sometimes crossing in rapid flight, have turned hither and thither with scorched wing and terror-stricken step; or, mayhap, in their devious way, now to hope and again to despair, have gone down at last in endless night.

In this border-land have dwelt great numbers of the marked men of their race; warriors, philosophers, kings, poets, prophets, artists, patriots and statesmen.

The history of our fellow-men who have thus partaken of the greatest glories, but also of the most frightful calamities that may befall humanity, has for us a fascination beyond the wanderings of a Livingstone or a Stanley in equatorial wilds, or a Kane or Greeley amid the frozen secrets of the arctic North.

Ever since man recorded his thoughts for brother man, the conception of the supernatural has accompanied his mental life. Consciously or unconsciously, we are striving again and again to pierce

the veil about us, and know the ultimate reasons of things, and recognize their invisible causes.

From the time of the familiar Demon of Socrates, or the attendant spectre of Descartes, to the witches of our ancestors, and the spirit manifestations of our own times, the human mind has ever been reaching for alliance with the supernatural. To plunge into the depths of profound abstraction, to lose one's self in the inmost recesses of reverie, is a perilous journey, from which only the most gigantic minds, like Homer and Shakespeare, can safely return.

There are lessons from the shadowy side of life, of the wanderings of the great by the Plutonian shores, that are often concealed from sight, or glossed over by the historic pen, or darkly hinted, but which, if openly read and courageously considered, may not be without good to come.

There is, perhaps, no disease or ailment to which humanity is subject, more obscure or less understood than insanity.

This proposition is intended to apply to its etiology, classification, prognosis and treatment.

Even its definition is so difficult to formulate in words that scarcely any two authors of original writings agree. This disease, or rather the disease that produces it, has in all ages been the *sui-generis* of pathology, baffling the investigation of science, resisting the efforts of philanthropy and defying the satisfactory administration of justice in criminal jurisprudence.

Not many ages in the past it was regarded as metaphysical, and in its investigation and management was relegated, by common consent, to the domain of theology, being considered a special manifestation of Divine displeasure. The sufferers were subjected to punishment or rough treatment in order to exorcise the devils that had taken possession of the human body. In many cases whipping, ducking, starving and other cruelties were the recognized methods of treatment, sanctioned by law and practiced by their custodians. In the light of the civilization of the present age such a record of the administration of law and humanity seems almost incredible.

The difficulty of a thorough knowledge of the pathology of mental disease is to be found in our superficial knowledge of the physiology of mind in health. Without thoroughly understanding a healthy mind we can hardly be expected to comprehend all the mysteries of a diseased one.

The first inquiry that engages the attention of the alienist and the student of psychology is, What is mind?

Teachers and writers would not all formulate the answer to this question alike. There can be but little hesitation in answering that mind is the sum of the mental faculties of the brain and nervous systems. These faculties are divided by all the writers of mental philosophy, as well as the intelligent alienists and psychologists, into the intellectual, emotional and volitional functions. The intellectual faculties preside over thought; the emotional over feeling, and the volitional over action. This last may be called the executive power of the mind. While the localization of many of the physical and some of the mental functions of the brain has been determined, others are still unsettled or unknown.

Some of our ablest investigators, while admitting that the purely intellectual functions are the result of cerebration, also think that the emotional faculties are based on the great sympathetic nervous system.

The intellectual faculties, whose physical basis is the brain, are almost universally believed to be :

Perception,
Conception,
Memory,
Reason,
Comparison,
Understanding,
Judgment,
Imagination.

It can scarcely be allowable, in a short paper like this, to occupy your time and attention with anything more than a bare statement of a proposition so universally conceded, to-wit : That the brain is the organ of all the purely intellectual faculties, and that the classification just recited is sustained by all distinguished authors, some of whom state that investigation has proven the location of this class of functions to be in the gray matter of the anterior lobes of both hemispheres.

The classification of the mental functions into intellectual, emotional and volitional, was first taught with emphasis by Griesinger, perhaps the most thorough alienist, in both theory and practice, that any country has ever produced. His work on "Men-

tal Diseases" is to all others, in many respects, what the Bible is to Commentators.

The sub-classification on the intellectual faculties of the brain needs no discussion, if the consensus of opinion of the highest authority of specialists, as well as the observation of the profession generally, is accepted as conclusive.

That the emotional, or second division, is altogether distinct from the intellectual, either in physiological or pathological investigation, is by no means so universally acknowledged. Indeed, it seems unaccountable that by some reputed experts it is not acknowledged at all.

By Griesenger, Maudsley, Hammond, Bucke, Ranney and numerous others, the distinction is as clearly and conclusively defined as any other proposition in mental science. By some it has been discussed under the misnomer of the moral faculties. Dr. Hammond has discussed this subject with more ability than any recent author. Most authors divide this classification into the :

Emotions,
Affections,
Desires.

The differences exhibited in the semiology of this group of mental functions from others, both in health and disease, are so apparent as to suggest the idea of different physical bases altogether. This view, however, has not been formulated, so far as I know, by any standard author on mental disease. It must therefore depend for recognition, more upon reason and observation than upon authority.

There are, I believe, many arguments in favor of the opinion that the great sympathetic nervous system and not the cerebro-spinal, is the physical organ from which these functions emanate. The functions as a whole of the great sympathetic nervous system have never been very clearly defined. Those of the cerebro-spinal have.

In health the intellect *thinks* and *knows* ; the emotional nature *feels* and *desires* ; the volitional *wills*, *acts* and *executes*. The organ of the first is universally admitted to be the brain ; of the second is most probably the great sympathetic nervous system ; of the third, a part and parcel of both the cerebro-spinal and the great sympathetic. This three-fold division of the mind is not composed of

independent entities, but are, in construction a function, "distinct as the billows, but one as the sea."

The sub-classification first mentioned is the recognized embodiment of the intellect. The emotional group is clearly represented by the functions and feelings of :

Love,
Hate,
Faith,
Fear.

Three of these terms, to wit : *Love*, *hate* and *fear*, require no explanation. *Faith* needs to be defined. *Faith* is the opposite of fear, as love is of hate. It is purely moral function. It should not be confounded with belief, which is purely intellectual function. Faith is almost synonymous with *trust*, *confidence* and *courage*.

To determine the functions of the great sympathetic with as much accuracy as we understand the functions of the cerebro-spinal, let us examine briefly the structure of this vast complicated organ. The great sympathetic consists in the first place of a double chain of ganglia, over fifty in number, extending from the base of the brain, along the sides of the spinal column, to the coccyx ; of cardiac ganglia, the semilunar, and numerous others, named and unnamed, scattered among thoracic, abdominal and pelvic viscera, together with nerve cords connecting the sympathetic ganglia with nerve trunks and nerve centres of the cerebro-spinal system. No part of the body is entirely without sympathetic fibres, and in the aggregate this system cannot fall below the mass of the cerebro-spinal system. One author (Davy) says that "it constitutes a great part of the volume and whole weight of the body ;" and a recent writer in physiology (Bucke) says that "neither its cells nor its fibres are like those belonging to the brain and cord ; that the difference in minute anatomy between those two systems is sufficient to make it quite certain that there is a decided difference in their functions." High authority teaches that of the organs supplied by this system the *heart* receives the greater quantity. Next to the heart come the *supra-renal capsules* ; in the third rank stand the *sexual organs*, the *testes* and *ovaries* ; next in supply are the organs of special sense ; next the stomach, the intestinal tract, the liver, the kidneys, the spleen and pancreas, and lastly the lungs, which, in proportion to their size, receive a very small supply.

An important conclusion from these and other anatomical and physiological facts is, that the movements of the striped muscle are controlled by the cerebro-spinal, and the unstriped by the great sympathetic system. Dr. Bucke says that this system exercises controlling influence over the secreting glands, and that the will in health has no influence upon the functions of these glands. If this be true, as it doubtless is, it has an important bearing upon the etiology and diagnosis of emotional insanity, and is suggestive of the want of moral responsibility for actions of violence on the part of the victims of this form of mental aberration.

Several of the vital organs receive no nerves from the cerebro-spinal, but are exclusively supplied by the great sympathetic. Of these may be mentioned the kidneys, the ovaries, the supra-renal capsules and the liver ; and, as we all know, these organs, when diseased, not infrequently produce the profoundest symptoms of emotional insanity. Can this argument be answered upon a different hypothesis ?

Want of time prevents the discussion of the question of the locality or basis of emotional functions to a conclusion, but I suggest as a fact in the experience of the entire profession, that in the diseases of organs which are comparatively scantily supplied by the sympathetic, such as bones, muscles or lungs, there is little or no derangement of the moral or emotional nature ; on the other hand, in diseases of the stomach, heart, liver, kidneys, supra-renal glands, and of the testes, ovaries and uterus, there is always some, and often great, disturbance of the emotions. In cancer or ulceration of the stomach, and chronic gastritis, there is a great degree of emotional disturbance. All physicians engaged in general practice have seen cases of dyspepsia in which melancholy or occasional attacks of depression or terror rendered the patient's condition pitiable in the extreme. I have witnessed such cases often in diseases of those organs supplied almost exclusively by nerves from the sympathetic system, and in cases where the mind was perfectly clear and no perceptible disturbance of any part of the cerebro-spinal system. The lungs receive a very small supply of sympathetic nerves, and we know that very long continued disease of their tissue, ending in destruction of considerable portions, and at last in death, will often scarcely give rise to low spirits, never to extreme depression or to violent emotion of any kind. The heart receives a very large sup-

ply of sympathetic nerves, and its diseases, such as fatty degeneration of its substance and calcareous degeneration of its arteries, are accompanied by very great depression of spirits, and often by agonies of anxiety and terror.

But the strongest illustration of my argument is Addison's disease of the supra-renal glands. The number and size of sympathetic nerves sent to these bodies is very great. They receive no cerebro-spinal nerves at all. Those who have cases of this disease are cognizant of the extraordinary effect produced upon the emotional or moral nature of the patient. Long before the sufferer is obliged by the degree of his illness to abandon his usual occupations, extreme low spirits, bordering upon despair seize him.

Lastly, it is within the experience of every one, that a cry of distress, heard suddenly, awakens a corresponding emotion in the hearer before any thought is aroused.

To summarize the argument: Everybody concedes that the cerebro-spinal nervous system, the brain more especially, is the organ of the intellectual faculties of the mind. Whether I have proven it or not, there can be no doubt that the great sympathetic nervous system is the organ of the emotional faculties. The basis of the volition or will has its location in both systems, and will be explained more minutely in the pathology of structure.

The question now recurs: "What is insanity?"

Philosophically, it is the penalty of the progress of modern civilization.

Science has overturned the theories of centuries on this subject! It is now universally admitted to be a diseased condition of the physical basis of mind in health. Its definition is so difficult to formulate that scarce any two authors agree. Griesenger defines it to be: "A complication of symptoms of various morbid conditions of the brain."

Maudsley says: "It is a disorder of brain producing disorder of mind, or rather a disease of the supreme nerve centres of the brain, the special organs of mind, producing derangement of thought, feeling and action, together or separately, of such degree or kind as to incapacitate the individual for the relations of life." This definition of Maudsley has met with great favor among physicians.

In all the definitions, while necessarily more or less inaccurate, on account of the difficulty of including, in a few words, all the

phenomena of a disease so intricate and obscure, and excluding all the symptoms incident to the various other brain and nervous troubles, either as a *post hoc* or *propter hoc* in pathology, is the important fact that a diseased condition, either functional or organic, of the physical basis, is essential to the unhealthy functions which we designate by the term insanity.

In answer to a request by a circular letter addressed to the members of the Medico-Legal Society of New York, for an original definition of insanity, I gave the following answer: "Insanity is a perceptible departure from normal mental life, resulting from functional or organic disease of the brain or nervous system, without adequate, recognizable causes for said departure." This definition is intended to exclude many symptoms of diseases resembling technical insanity, such as the delirium of fever, aberrations resulting from narcotics or stimulants to excess, traumatic injuries, inhalations of anesthetics, etc.

Great advancement has been made in the etiology, pathology, diagnosis and treatment of the various forms of mental disease from the constant care and treatment of patients, and especially by post mortem microscopical investigations of the brain of those dying of this disease, as well as those who were restored to health, whose history was noted and compared to the microscopical development of brain tissue.

Every hospital for the insane should be equipped for these investigations for the benefit of science and humanity. Microscopy affords the wide field for investigation in the *terra-incognita* of this specialty in medical pathology; and every medical college should have a regular chair and professor of psychological medicine as a part and parcel of its curriculum. In this connection I beg leave to report a few sentences I addressed to the Alumni Society of the Medical department of the University of Pennsylvania, at its annual reunion in 1885:

"What interest has the general practitioner in adding a knowledge of insanity to his medical information?"

"Why should psychological medicine be taught as thoroughly as any other portion of medical science?"

In reply, it may be asked, why should that form of nervous disorder, which is at first the most curable, perhaps, but which, misunderstood and neglected, becomes the most fearful of human

afflictions, rendering life an unending torture, blasting the happiness of home, poisoning the fountain of life for an innocent posterity, and perhaps closing in the destruction of life and posterity, to find its rest in the grave of suicide; why, let us ask, should this disorder, which is the crown and culmination of so many nervous afflictions, alone be set apart to the study of a few physicians, when the whole medical world might share the task? The law very properly requires that the insane, before any abridgment of their liberty by confinement in a hospital, shall be duly adjudged as victims of their disorder, after the examination of physicians. Why not prepare the medical man for that delicate and difficult task? Remember, the decisive moment is often passed, alas, perhaps usually lost, while friends are ignorant, and the young physician is slowly apprehending the force of facts, which, in the light of clinical experience, would force conviction, quick and irresistible, upon him. Too true it is that here he who hesitates is lost.

Or is it to be maintained that physicians ought only to be expected to pronounce upon the existence of insanity after the early prodromic stage, of such vast importance, has already passed away, and the disease is triumphantly marching on to its predestined wreck of the faintest of human hopes?

Maudsley well says:

"Mental disorders are neither more nor less than nervous disorders, in which the mental symptoms predominate; and their entire separation from other nervous diseases has been a sad hindrance to progress?"

It is indeed true that to your profession the insane owe all the successful efforts to relieve their wretched condition, and in their hands only has moral treatment been effective to the relief of thousands from an agony as far transcending the throes of physical pain as it is possible for the immortal part of man to excel in capacities of joy or woe the poor beast that gambols at his feet.

Let the medical profession at large make universal preparation to solve the problem of the care of the insane, and soon, alike with popular cruelty, with the dark popular dread of the victim and the unfathomable mystery which divides the affection from other and kindred neuroses, vanish from the excited imagination of the public mind.

To repeat in brief the reasons for the teaching of psychological

medicine, with fullness and with all the aids of science and experience, it is—

Because it is properly a department of medicine.

Because it is the chief of nervous diseases, many of which culminate in insanity.

Because it has to be met by the general practitioner, whether with preparatory study or without it.

Because so many cases may be absolutely cured, if observed promptly and treated in the formative stage.

Because physicians in the army or navy are necessarily called to treat such patients, perhaps throughout the whole of the decisive period.

Because of its vast importance in a medico-legal sense, as affecting the distribution of property and the administration of the criminal law.

Because lives and character and property of great value may be spared from destruction by its early recognition.

Because a free interchange of experience between physicians in charge of the insane, without and within the hospitals for their care, would greatly contribute to the enlightenment of the people, and the removal of the remaining relics of superstitious dread which disgrace so many communities.

But chiefly because the entire medical mind of the country would be engaged in solving the great problems of the mental hygiene of the people—problems which must be satisfactorily met if civilization is to endure the strain of its own internal forces.

And this brings us to consider the question as to the need of greater efforts for the care and treatment of insanity, especially in America.

The steady increase of insanity within our borders is a demonstrable fact. For a time it was explained away by the imperfections of the census, the better recognition of its subjects, and the greater attention devoted to their discovery and care. But we can deceive ourselves no longer. Year by year and day by day this tide of human misery is rising.

The simplest *a priori* reasoning would lead us to this conclusion. We live in age of excitement. Our whole environment bristles with stimuli, from the cradle to the death bed. The school systems, with the tramp, tramp, tramp of the juvenile grade in the

march to overtake one another, with the sad but inevitable application of "the survival of the fittest," the feverish eagerness for the cares and prizes of life, before the young shoulders are fitted for the toga; the impatience of parental control in childhood, and half-concealed defiance of all laws, statutory and social, that clash with the independent thinking which our whole body politic encourages; the enormous fortunes and the enervating luxury of the few, and the grinding privations and harassing anxieties of the many; the Moloch of business, to which, as a people, we sacrifice health and comfort; the ceaseless activity of mankind, which we struggle to know by the cable and the lightning press, and now even by the very voice of the world, breaking by the telephone upon the hours once set apart in our retreats for rest; the distributions of physical stimulants and their adulterations in food and drink; the unsanitary condition of the great centers of population, breathing poisoned air, whether in scenes of revelry or in the sanctuary of devotion; and last, but not least, the vast influx of immigration of the cast-off, criminal, pauper and diseased population of the old world. All these elements acting and reacting, and their effects pathologically reproduced and aggravated in the children of so many imprudent marriages between the inheritors of misfortune, render it impossible to expect less than the widespread mental disorder which is one of the gravest dangers that confronts modern society.

But we are not left to mere possibilities. I am indebted to the startling figures that reveal such facts as these, collated from the census reports of 1880 (those of 1890 generally increase the figures): The total number of the insane, by the census of 1880, was 91,997. In the Northern States the proportion of insane was 1 to 597 of native white population; in the Southern States, 1 to 660. Among the colored races in the Northern States, 1 to 545; in the Southern States, 1 to 1,232. The average of the whole native white population of the United States was 1 to 618. Among foreign whites, 1 to 250. Among the colored races, 1 to 1,097; and the general average of the whole population was 1 to 545.

Two points have thrown light upon the situation. Note the vast difference between the negro of the States of the North, collected chiefly in the cities, and the object in full force of the enervating and disorganizing influence of modern habits upon his bodily frame

and the same negro in the South, for the most part as an agricultural laborer, with few wants, a limited round of excitements, and dwelling in the free air of heaven as his fathers did. Nor does this arise from a neglect to enroll the colored insane. The State which I have the honor to claim as (former) home was the first to build and equip with all the appliances of modern science, a hospital for the colored insane—the free gift of the white race for the comfort and restoration of their colored fellow-citizens.

The second point of importance in these statistics is the surprising announcement that 1 of every 250 of our foreign-born whites is insane, a ratio of more than double the general average. What a tale this tells of the debris of social life in Europe poured upon our shores to poison the life-currents of this country! But this is not the place to discuss the economic questions of the sanitary control of immigration. I desire but to recognize among us the presence of a might evil.

Already more than a decade has passed since 1880, and we can scarcely doubt from past experience that the number now approximates 150,000. What an army of unfortunates! Of these there are probably 50,000 under treatment, and thousands of the others are either propagating successors to their heritage of wretchedness or carrying with them the faithful companions of the household, worn out with pain and anxiety, with watchings and privations, until patient and nurse alike sink into the mealstrom that so rarely gives up its dead. Who is there whose life has been spent among the sombre shades of the hospital for the insane, who has not witnessed the piteous spectacle again and again?

One hundred thousand lunatics to be cared for! They are already here present with us. No reasoning can do away with their presence—standing a mighty bar to national prosperity, a terrible menace for the future. Their support and comfort and hopes of restoration depend upon the toiling numbers who remain, after subtracting all their children, the disabled by sickness and infirmity of every kind, and all the idlers.

Tell me that it is not a solemn duty laid upon the medical profession, to hasten to the relief of the patient citizen, who must bear this burden of accumulated woe! What has been done heretofore at home and abroad to foster psychological medicine?

The immortal Rush himself was accustomed to teach the didac-

tics of insanity. according to what the pathology and therapeutics of his time might afford, and he took his students into the wards of the insane; from 1791 even, until long after, such duties fell within his province. If the next half-century should be as rich in advancement as the last, the debt of gratitude to science will be too large soon to be paid.

The pathological condition of the brain and nerve centres which produces insanity as their penalty, are already known to be, in part:

1. Dilatated and tortuous state of many of the blood vessels of a greater or less part of the cortex; sometimes diffused redness of portions of the brain matter; deformations of various kinds in the nerve cells.

2. Many vessels engorged with red corpuscles.
3. Sometimes very slight extravasations.
4. Fatty granulations and pigmentary deposits.
5. Hyperemia of the optic thalami.
6. Serious effusions into the meninges.

These observations by no means exhaust the pathological conditions of those complex organs that produce mental aberration.

Dr. Hammond, after enumerating the organic changes to be observed in the several classes of mania, melancholia and the intellectual and emotional groups, such as emotional morbid impulses, etc., says: "That the volitional insanities are likewise due to changes in the blood supply in the lower layers of the cortical cells, which he calls aboulomania, or, as we should say, paralysis or inhibition of will powers, and that vaso-motor spasm produces an anemic condition of brain cells and nervous centres, which paralyzes the executive functions of the mind."

But I cannot dwell here. I will, however, offer a few important symptoms appertaining often to any or all the classes or groups recognized in this paper. I have condensed the phraseology as much as I could to express the orthodox opinion of the best authors. I define the three most characteristic modifications of mania, melancholia, monomania and circular insanity, as follows:

A delusion is a false judgment, idea or belief resulting from physical disease of the brain or nervous system.

Bucknell gives as an example of this form: "Thinks his head is made of brass, or that he is a beggar or a prince." I had a

patient with the fixed delusion that she was the wife of the Prince of Wales.

Hallucination is a false perception of the senses: "Thinks he sees in the dark, hears through thick walls," etc.

An illusion is a mistaken perception of the senses: Thinks a cloud is a chariot, a footstep is the march of an army."

In hallucination there is nothing to see; in illusion there is something to be seen or heard.

Wherever a delusion, hallucination or illusion can be dispelled by reason on the part of the patient, it is not a symptom of insanity.

The classification of insanity is a task about which there is a wide difference of opinion. The systems of classification are almost as numerous as the writers on mental alienation. The different methods employed may be mentioned as:

1. The anatomical.
2. The physiological.
3. The etiological.
4. The psychological.
5. The pathological.

The psychological method was followed by Griesenger and other distinguished compeers and successors. Pathology by this method retains the same group as physiology, to wit: Intellectual, emotional and volitional insanities. These are subdivided into:

1. Mania, an exalted condition of mental derangement, generally characterized, in the acute stage, by delusions, hallucinations and illusions.

2. Melancholia, a condition characterized by depression, without delusions or delirium.

3. Monomania, a perversion of the intellect characterized by exaltation or depression limited to a single subject, or a small class of subjects.

4. Circular insanity, a variety of mental alienation characterized by alternations of exaltation, lucid intervals and depression.

5. Dementia, characterized by weakness or loss of the mental powers.

I have devoted some time to the consideration of definitions which might convey with considerable clearness the meaning of such important characteristics of certain forms of disease as delu-

sions, hallucinations, illusions, etc., but regret that the limited time does not admit of too much prolixity.

Some of the views expressed in this paper, on inquiries not altogether settled, coincide with those similarly expressed by Dr. Hammond, now of Washington, D. C., whose learning and labors entitle his opinions to great consideration.

In a recent trial in Denver, upon an indictment for murder, before the learned and able Judge Burns, these views were given in testimony, and met with the approbation of Doctors Yoakum, Bucknum and Craig.—*Denver Medical Times*.

Alcohol's Morbific Tendency.

BY G. WEEMS PETHERBRIDGE, M. D., CHARLOTTE HALL, MD.

I read your valuable journal with pleasure and with profit. Its careful perusal is interesting and highly instructive; its pages are brilliant with scientific thought and teeming with suggestions of the greatest aid to the busy practitioner, suggestions which render him the more successful in his efforts, skilfully, to combat pathological manifestations.

The interchange of views, upon medical topics, therein so ably discussed by men of profound culture, scientific research and acknowledged skill, renders it an invaluable auxiliary to the progressive physician, enabling him to keep abreast with the advances of medical science. It is as a vast consultation room, where men of various shades of opinion and grades of ability may converse and consult with each other, as well as instruct and improve each other; where the rich fruitage of scientific thought and indefatigable research may be gleaned to enlighten the experienced *Æsculapius* along the intricate labyrinths of physiological defection.

But not the least among its many excellencies is its disposition to disapprove and discountenance the employment of alcohol, as a remedial agent, in the treatment of disease.

That all functional departure from physiological action tends to weaken the creature, lower the vitality of the system, and consequently to lessen the vital force, or, in other words, is devitalizing in its tendency, no one will deny; and why alcohol, which differs from all articles of food in that they are produced by the processes of growth and development, while it (alcohol) is prepared by the

fertmentative processes of vegetables, and is the result of decay—decomposition—should be regarded as food, as being able to sustain the system in the absence of food, or be thought an appropriate agent to arrest the process in animal life, which is analogous to the process in vegetable life that produced it, is more than I can discern.

While all food is produced in the formative processes of vegetables, all things so produced are not food, as opium, tobacco, and other vegetable poisons. "Food is that which being innocent in relation to the tissues of the body, is a digestible or absorbable substance that can be oxidized in the body, and decomposed in such a way as to give up to the body the forces which it contains."

If this definition of food be philosophically correct, we think it difficult to prove that alcohol is food when we duly consider its effects upon the system. Alcohol diminishes the temperature, impairs nutrition, lessens the strength, renders the system more susceptible to morbid influences, and shortens life. It is not innocent in relation to the tissues of the body—it destroys their vitality. It is not digestible, its presence in the breath affords ample proof of this. And so far is it from giving force to the system, it abstracts from it. It deranges the normal proportion of elements in the gastric juice, "increasing its alkalinity and diminishing its acidity," and hence its use creates an appetite for acids. It inflames the stomach, producing gastritis, which superinduces indigestion, with its multitudinous and multiform morbid manifestations. It leaves its deleterious impress upon the tissues of all the organs of the system, and most markedly upon those whose functions are emunctorial. Dr. James Edmunds, F. R. C., Eng., says: "It is a fact, which cannot be disputed, that diseases of the liver, diseases of the lungs, diseases of all the tissues of the body, are induced directly by the use of alcohol, and that as a general rule you may say, that where you have alcohol used most largely and most frequently, there these diseases and degenerations in the tissues of the body become the most marked."

It is not a tonic to the system, "for while iron enters the blood and acts beneficially thereon, alcohol entering the blood acts injuriously—so injuriously that its advocates admit that were it constantly present the result would be fatal." Dr. Dundas Thomas says: "Alcohol, when added to the digestive fluid, produces a white

precipitate, so that the fluid is no longer capable of digesting animal or vegetable matter." And Bowman says: "Alcoholic stimulants retard digestion, coagulating the pepsin, and thereby interfering with its action." Its action in the system is toxic, and the excitation of pulse, the elevation of temperature or the warmth that is produced when it is taken into the system, is but the violent rallying of the vital forces to expel the poison for the vital domains. Christison says: "The sedative action of alcohol upon the brain constitutes it a powerful narcotic poison." Youmans says: "Alcohol stands high as a toxicological material. Its use diminishes the capacity of the digestive organs to convert food into tissue." Dr. N. Gilman (Mass.) says: "Alcohol, in all its forms, might be called an *irritant poison*, possessing no tonic or strengthening properties whatever. The digestive organs have no power to change it, or extract from it any nourishing principle. Without undergoing any change, except what is produced by dilution, it is taken up by the absorbents, carried into the blood, and goes the rounds of the circulation. Thus every organ and tissue in the body has an irritant poison brought into actual contact with it. This must be expelled without delay, or their vitality is endangered, and an additional task is thus imposed upon the vital organs. The apparent increase of strength is nothing more than the latent nervous energies aroused for the sole purpose of driving out this enemy from the body. When this task is over, there is still greater exhaustion. Nothing has been gained by the operation, but a positive loss has been sustained."

Not only is alcohol not a food, nor a tonic, but it is disease-producing in its tendency. It has its origin in dead matter, and its tendency is to produce death in living matter. Dr. Carpenter says: "It has the power of coagulating the soluble albumen, and thus retarding its conversion into the more vitalized substance—fibrin—and as nearly all the organized tissues are developed at the expense of fibrin, it is obvious that anything which impairs its organization must have an injurious influence upon the general nutritive operations." Again he says: "It disturbs the vital functions by preventing the decarbonization of the blood through the agency of respiration." Dr. Chas. G. Davis, of Chicago, says: "While passing through the body it disturbs the various physiological processes, and in this way lays the foundation for disease." Again:

"Alcohol is not only unnecessary as an active medicinal agent, but in a majority of cases it is an actual hindrance to the recovery of the patient."

Dr. George B. Wood says: "Alcohol renders the system at all times more liable to inflammatory attacks from ordinary causes, especially in the earlier stages of its habitual use." Again he says: "Another evil from its abuse is the direct production of inflammation in the organs upon which its stimulant agency is most strongly exerted—the stomach, the brain, the lungs, and the liver. These are most frequently affected, but the bowels, kidneys, heart and arteries sometimes participate in the disease." Dr. Higginbottom says: "I have found that by abandoning the alcoholic treatment, acute disease is much more readily cured, and chronic disease much more manageable."

Among the diseases produced by alcohol, enumerated by Dr. J. Ellis, author of "Avoidable Causes of Disease," are apoplexy, paralysis, laryngitis, bronchitis, heart failure, fatty degeneration of the heart, diseases of the stomach and liver, and Bright's disease. "And many drinkers," says he, "die from an inability to either resist or withstand epidemic, contagious or inflammatory diseases."

Its irritant action in the stomach causes a plethoric condition of the capillaries of its lining membranes, which superinduces inflammation of that organ; and the brain, sympathizing with the stomach and receiving blood unduly charged with carbon and deficient in oxygen, becomes proportionately congested (the arachnoid being turgid with uneliminated carbon and the pia mater distended with unoxidized blood), as is evidenced by stupor, confusion of ideas, loss of voluntary control of reason, of judgment, and of power of thought.

"Oh, that men should put into their mouths that which steals away their brains."

By diminishing the normal quantity of acid it increases the normal proportion of alkaline element in the (gastric) digestive fluid. By coagulating the albumen in the stomach it diminishes the healthful quantity of fibrinating material in the lacteal fluid. By unduly increasing the carbon, it diminishes the normal proportion of oxygen in the circulating fluid, and as the continuance of health is conditioned upon the maintenance, in a healthy state, of the three fluids named (the normal condition of each depending

upon that of the other, inversely in the order given), the impairment of one must become proportionate to the derangement of the other.

And, again, "the blood is the life," and as the life-producing blood requires for its elaboration health-promoting materials in the lacteal fluid, and healthy, blood-producing chyle requires for its production that the normal proportion of elements in the gastric fluid be maintained, consequently as the gastric secretion is disordered the chylous fluid becomes deranged, the blood diseased, and life and health proportionately endangered.

Alcohol rapidly exhausts the excitability of the system, diminishes the general activity of, and enfeebles the functions, and induces debility, which leads to other disorders. It depresses the nerve centers, depraves nutrition, and disturbs the decarbonization of the blood, the preparation of healthy chyle, and the normal proportion of elements in the gastric juice. "It paralyzes the capillary vessels (filling them with blood) upon which the separation of waste and worn-out materials, and their removal from the system depend, and thus obstructs the normal distribution of nutriment to all the structures of the body, and, consequently, very seriously interferes with their renewal or continuance in a healthy condition."

I once heard a physician assert that if a doctor had a case of typhoid fever and did not give it whisky, he was bound to lose it, a statement that I have again and again disproved. I have lived in the four southwestern counties of my State, and my observations respecting the use of alcohol in the treatment of typhoid fever and pneumonia have been that in four-fifths, if not more, of the cases where whisky has been employed too. It is as if one would put in the invisible spirit (that the poets call devil) that it might put out the immortal spirit of man. For that seems to have been the ultimatum in a majority of cases that have come under my observation. Indeed, the more I read the experiences of men in the medical world, whose acknowledged ability and progressive skill render them competent judges as to the value of alcohol in the treatment of diseases, and the more closely I observe the results in the cases where alcohol has been employed, the more am I inclined to the opinion that the tendency of alcohol is to aid pathology to destroy the patient rather than to assist nature to repel disease and restore health. Wood, King, Flint, Barlow, Jones and Sherwood concur

in the opinion that the prognosis in typhoid fever and pneumonia is generally favorable to the patient's recovery. But who wonders at the fatality of any disease when it is aided by the devitalizing spirit of the still?

Dr. N. S. Davis, of Chicago, says: "If anyone will take the trouble to examine and analyze carefully the records of the large general hospitals of both Europe and America for the last half century, I venture the statement that the ratio of mortality from general fevers and acute diseases will be found to have increased, *pari passu*, with the increase in the quantity of alcoholic drinks consumed in their treatment." Dr. Wilson, of Philadelphia, says: "Alcohol forms no necessary part of the routine treatment of typhoid fever." Sir William Jenner says: "The large proportion of typhoid patients get along better without it (alcohol) from beginning to end." And Dr. Ellis says: "No more dangerous treatment has ever been adopted than to give alcohol in the critical stages of disease, in any form or quantity."

It is "the spirit that worketh in the children (and men) of disobedience" to the hygienic laws of nature.

Dr. Gilman says: "It may be laid down as a rule, that if alcoholic liquors relieve, or seem to cure one disease, they cause some other as bad or worse. The patient is not always dying when the pulse becomes very feeble and intermittent. I would not take the responsibility of deciding the point whether stimulants of any kind are ever beneficial in these cases, but I do venture the opinion that, if necessary, we have at our command many articles of that kind which should have the preference to alcohol. Of this character we have ammonia, oil of peppermint and spearmint, ginger, Cayenne pepper, serpentaria, etc. If we can give the desired impulse to the heart, brain and nervous system without subjecting these organs to the poisonous contact of alcohol, much is gained."

So that alcohol, the diabolical digestion-deranging, blood-decarbonizing-disturbing, nutrition-depraving, tissue-devitalizing, structure-degenerating, function-debilitating, depuration-deterring, nerve depressing, systemic-disorganizing, life-destroying, death-dealing demon of the distillery is admittedly an acrid and ardent accessory to abnormal action, and has not the pre-eminently prompt, potent and praise-worthy panacea-possessing properties which prevent

physiological perversion, and prompt the physiologic performance of the animal functions that it is by some claimed to have.

In the body alcohol is a toxicological devil-fish, devitalizing every tissue and debilitating every function in the system. It is a Grecian horse within the Trojan walls—it surrenders the citadel of life to the invading horde of pathological influences.

Dr. John King, of Cincinnati, says: "All liquors are injurious to the human constitution. Their habitual use produces chronic inflammation of the stomach, loss of appetite, sour stomach, headache, peevish irritability, loss of memory, fetid breath, nausea, diseased liver, jaundice, dropsy, impotency, gout, colic, epilepsy, apoplexy, and mania."

James Miller says: "Diseases of the brain, of the lungs, of the heart and arteries, of the stomach and bowels, of the liver, of the kidneys, of the skin, gout and rheumatisms, dropsies, palsies, scrofula, premature decay; general poisoning; delirium, epilepsy, fatuity, madness—these are but a part of the long black list that might in sad and sober truth be enumerated as more or less directly caused by alcohol. We assert the fact, and defy its contradiction, there is no one cause of disease in this country so prolific as alcohol."

My venerable preceptor, the late Dr. N. R. Smith, of Baltimore, Md., once said: "Whisky and tobacco create more diseases than all other causes combined, and they have vastly more power to create diseases than the medical profession has to discover and apply remedies."—*Medical Brief*.

First Quack—Here is a letter it would hardly do for us to publish. A man writes: "I have just taken my first bottle of your medicine, and I—"

Second Quack—Well?

First Quack—There it breaks off short, and is signed in another handwriting, "per executor."—*Brooklyn Life*.

Amenorrhea and Chlorosis so common in school girls and teachers is due largely to nervous exhaustion, and where iron fails to relieve the nervines and uterine tonics contained in Diowibernia will often prove signally effective. Dose, a teaspoonful three times a day, and double the dose just before and during the menstrual period.

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Containing the Essential Elements of the Animal Organization—Potash and Lime;

The Oxidising Agents—Iron and Manganese;

The Tonics—Quinine and Strychnine;

And the Vitalizing Constituent—Phosphorus; the whole combined in the form of a Syrup with a Slightly Alkaline Reaction.

It Differs in its Effects from all Analogous Preparations; and it possesses the important properties of being pleasant to the taste, easily borne by the stomach, and harmless under prolonged use.

It has Gained a Wide Reputation, particularly in the treatment of Pulmonary Tuberculosis, Chronic Bronchitis, and other affections of the respiratory organs. It has also been employed with much success in various nervous and debilitating diseases.

Its Curative Power is largely attributable to its stimulant, tonic, and nutritive properties, by means of which the energy of the system is recruited.

Its Action is Prompt: it stimulates the appetite and the digestion, it promotes assimilation, and it enters directly into the circulation with the food products.

The prescribed dose produces a feeling of buoyancy, and removes depression and melancholy; *hence the preparation is of great value in the treatment of mental and nervous affections.* From the fact, also, that it exerts a double tonic influence, and produces a healthy flow of the secretions, its use is indicated in a wide range of diseases.

NOTICE--CAUTION.

The success of Fellow's Syrup of Hypophosphites has tempted certain persons to offer imitations of it for sale. Mr. Fellows, who has examined samples of these, **finds that no two of them are identical**, and that all of them differ from the original in composition, in freedom from acid reaction, in susceptibility to the effects of oxygen when exposed to light or heat, **in the property of retaining the strychnine in solution**, and in the medicinal effects.

As these cheap and inefficient substitutes are frequently dispensed instead of the genuine preparation, physicians are earnestly requested, when prescribing the Syrup, to write "Syr. Hypophos. **Fellows.**"

As a further precaution, it is advisable that the Syrup should be ordered in the original bottles; the distinguishing marks which the bottles (and the wrappers surrounding them) can then be examined, and the genuineness—or otherwise—of the contents thereby proved.

Medical Letters may be addressed to

Mr. FELLOWS, 48 Vesey Street, New York.

Charlotte Medical Journal.

E. C. REGISTER, M. D.,

J. C. MONTGOMERY, M. D.,

Editors and Publishers,

NO. 36 SOUTH TRYON STREET,

CHARLOTTE, N. C.

✧ SUBSCRIPTION, \$2.50 PER YEAR. ✧

Articles intended for the Original Department of the Charlotte Medical Journal will be accepted only with the understanding that they are contributed to it exclusively.

ATLANTA, GA., has two hundred and eight regular practicing physicians. A fair number for a city of 75,000 population.

DR. A. K. BOND, who for two years past has been the successful editor of Maryland Medical Journal, a bright and newsy weekly, has retired from its editorial chair. The increasing demand for his services in his private practice necessitated the change.

FROM the reports given in the newspapers and medical journals the sanitary condition of the Carolina coast has become very serious. This is caused by the hurricane which recently swept over that part of the coast. The reports sent into the Marine Hospital service show a very large number of malarial and diarrhoeal cases. These diseases were so prevalent that they could scarcely give the sick the proper attention. A medical officer has been sent by the President, and has placed at his disposal a revenue cutter.

DR. THOMAS MOORE.

Last Friday the College of Physicians and Surgeons, of Richmond, Va., was formally opened, and Dr. Moore, formerly of this city, delivered an address. The Richmond Dispatch of last Saturday had the following, which is of interest to the profession of North Carolina :

"After prayer by Rev. Dr. Hoge, Dr. Wm. S. Gordan introduced Dr. Thomas Jefferson Moore, who delivered the address to the matriculates. Dr. Moore gave a succinct history of the progress of medicine and surgery, dwelling particularly upon their advances during the present century, and showed that, owing to the subdivisions of both branches, and the rise of specialists, the student of

to-day possessed many advantages over the student of even a generation ago. His address displayed remarkable familiarity with the wide field of modern medical and surgical practice, and a most comprehensive knowledge and appreciation of medical literature. Dr. Moore spoke from a full mind, and from the standpoint of a physician who loves his profession, and his address made a splendid impression."

JOURNALISTIC APPRECIATION OF MEDICAL MEN.

The following has been taken from the New York Sun, and it very justly and fittingly describes the dangers and vicissitudes that physicians daily encounter. I do not know the writer of the article, but he has a sympathetic heart for the poor physician, and it is certain that he possesses one noble trait :

"There are always risks for doctors in attendance upon patients suffering from contagious or infectious maladies. Yet they are always ready to brave the danger, without flinching, in the interest of humanity. Honor to our noble army of doctors !

"Hundreds of them volunteered for service here last autumn, when the city was threatened with cholera. We do not know how many of them have sent word to Surgeon-General Wyman that they stand ready to go to Brunswick or to any other part of the South in which the yellow fever may break out. Whatever be the risks from any disease, the medical faculty is ever ready to confront them. Long live the doctors ! We have sent American doctors to the cholera-infected ports of Europe, and several of them have done splendid work there this year. If a hundred of them had been needed, we have no doubt that a thousand of them would have offered their services. Heroes are the doctors. They will enter a pest house without shrinking, attend to every case in it, and do all that can be done to relieve the sufferers. Blessed be the doctors ! They are men of science, men of skill, men of earnest purpose, men of sympathetic disposition. They are devoted to their duties. Dr. Walter Vought, who died of typhoid fever last Sunday in the New York Hospital, of which he was house physician, was a man of talent and still in his early prime. He took charge of the quarantine station at Fire Island last year during the 'cholera scare'; he had rendered service in the Vanderbilt Clinic; he died in a hospital. Though he had but just turned

thirty years of age, he was the author of works upon malarial fevers, the cholera, and other diseases; he had already won a name in the profession. We knew him personally, and we can testify that he was a high-minded gentleman.

“There's rosemary, that's for remembrance; . . .
and there is pansies, that's for thoughts.”

NEW DIAGNOSTIC SIGN OF TYPHOID FEVER.

Dr. Simon Baruch, in the New York Medical Journal, September 2d, 1893, pointed out what he considers a new diagnostic sign of typhoid fever. He describes it as follows:

“So soon as the patient shows a rectal temperature above 102.5° in the morning and 103° in the evening for three successive days, especially if accompanied by headache, dullness, or apathy, he is placed into a full bath at 90° , which is reduced to 80° , with constant friction over the body. In three hours, the temperature still being above 102.5° , he receives another bath five degrees cooler. This is repeated until the temperature of the bath is 75° . If one or more of these baths fail to reduce the rectal temperature two degrees in half an hour, the diagnosis of typhoid fever is almost certain and the bath treatment is continued.

“The point emphasized is that the resistance of the rectal temperature to a bath of 75° for fifteen minutes with friction is an almost certain test of typhoid fever.

“If the rectal temperature before and after a bath of 80° to 75° is not reduced at least one degree in half an hour, the diagnosis of typhoid may be safely made, if other symptoms point ever so slightly in this direction. Hence the diagnosis of this disease should no longer be obscure even in the first days of its course.”

Should these results be verified by other observers the discovery will certainly furnish an invaluable aid in the early diagnosis of typhoid fever in doubtful cases. I have often recognized, when properly employed, the value of antipyretics in the diagnosis of this disease. It is, however, doubtful in my mind whether this plan of Dr. Baruch's is superior to quinine sulphate when it is given in antipyretic doses and continued for three or four days, if all solid and irritating substances are removed from the alimentary canal and if the patient has been properly fed, quinine used in this way will control a continued fever if it is due to malaria, and if it

is due to a local inflammation it is indeed very seldom, with a reasonable amount of care, that we have much difficulty in distinguishing it from typhoid fever. It is, indeed, very seldom in North Carolina that we have to make a diagnosis between but these two specific fevers and when a continued fever is not due to a local inflammation and is not controlled by quinine, when it is properly used, I very often feel justified in making a diagnosis of typhoid fever, even when the characteristic diarrhœa and eruption are absent. The doctor considers that it is the resistance of the rectal temperature to a bath of 75 degrees that is of such diagnostic value. He does not say that this same resistance of the temperature to a bath of 75° for 15 minutes cannot be demonstrated as well with the thermometer under the tongue as if it was in the rectum.

DISINFECTING TYPHOID STOOLS.

No doubt every physician knows that the fœcal discharges from typhoid fever patients should be thoroughly disinfected, and you could scarcely find one who is not familiar with this process. The one point wished to be emphasized here is the fact that this important duty of every physician is in many instances *neglected*. 'Tis true he knows how to do it and knows it ought to be done, yet how often is it not done. This is a very serious and important duty resting on every physician. We take, for instance, a family in which two cases of typhoid fever have developed, and before many days a third; the physician sees this disease is spreading rapidly; he seeks the cause; finds it in an uncleanly well, and removes the cause and checks the spread of the disease. All this he accomplishes very skilfully and successfully, with much delight to the family and a great gratification to himself. This is all well and good; but at some time, when one of his patients' bowels act, and possibly he is not there, and he has not been as explicit as he should have been in giving instructions as to disinfecting the stools, and they are thoughtlessly emptied behind the privy, or, if in the country, and if a branch is convenient, there it is emptied, the worst place possible. Now is not this often the case, especially in small towns? In hospitals, of course every precaution is taken, and sanitary rules are strictly carried out. I am fully aware that this is a very old and simple subject to discuss, but its importance can not be too strongly urged upon every physician.

REMOVAL NOTICE.

Messrs. Sharpe & Dohme, the well known manufacturing chemists, of Baltimore, Md., have just issued the following notice :

BALTIMORE, MD., October 1st, 1893.

In order to serve the best interests of our constantly increasing number of friends in the wholesale and retail drug trade and in the medical profession, and recognizing the unexcelled advantages offered by the metropolis for the prompt and satisfactory disposition of business, we have decided to remove our general offices from Baltimore to New York about October 1st. There will be absolutely no change either in the personnel of the firm or the general business policy maintained by us for the past thirty (30) years.

Our recently enlarged and completely equipped laboratories will remain in Baltimore, where all matters pertaining to the manufacture and packaging of our products will receive in the future as in the past our personal and most careful attention.

All orders, remittances, requests for quotations, samples or literature, as well as all general correspondence relative to our business, should be addressed to our general offices at 41 John street, New York.

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Fellows' Syrup of Hypophosphites is peculiar to itself. Many try to imitate it, but without success. Fellows' Syrup contains the tonic properties, quinine and strychnine, which make it of unquestionable value. Mr. Fellows has examined several preparations pretending to be just as good as "Fellows' Syrup," but finds that no two of them are identical. Fellows' Syrup is different from the others in composition, in freedom from acid reaction and in susceptibility to the effects of oxygen when exposed to light or heat, in the property of retaining the strychnine in solution and in the medicinal effects.

BOOKS REVIEWED.

A DICTIONARY OF MEDICAL SCIENCE. Containing a full explanation of the various subjects and terms of Anatomy, Physiology, Medical Chemistry, Pharmacy, Pharmacology, Therapeutics, Medicine, Hygiene, Dietetics, Pathology, Surgery, Bacteriology, Ophthalmology, Otology, Laryngology, Dermatology, Gynecology, Obstetrics, Pediatrics, Medical Jurisprudence and Dentistry, etc. By ROBLEY DUNGLISON, M. D., LL. D., late Professor of Institutes of Medicine in the Jefferson Medical College of Philadelphia. Edited by RICHARD J. DUNGLISON, A. M., M. D. New (21st) edition, thoroughly revised, greatly enlarged and improved, with the Pronunciation, Accentuation and Derivation of the Terms. In one magnificent imperial octavo volume of 1181 pages. Cloth, \$7.00; leather, \$8.00. Philadelphia: Lea Brothers & Co., 1893.

Dunglison's Dictionary is a name that is familiar to every student and practitioner. It is found in the book shelves of nearly every library. This great medical dictionary has had the lead for more than two generations, and this, the 21st edition, comes to hand with all its beauty of execution and accuracy of text, thoroughly revised, greatly enlarged and improved. For a book to reach the 21st edition is the highest encomium that can be given it. It would indeed be difficult to mention wherein this book could be improved, and it needs no prophet to see that it is destined to maintain its high excellence, as the standard dictionary, for many years to come. In this revision the changes and additions have been greater than in any other. Forty-four thousand new words and phrases have been added to place the work in conformity with the most advanced terminology of the time. Everything obsolete has been left out, the pages have been enlarged, and containing one hundred more pages than its predecessor, yet it is comprised in a convenient volume for constant use. Though the popularity of this book in the past has been very great, yet this is the first time pronunciation has been introduced, being indicated by a simple and clear phonetic spelling. Derivation, which is one of the greatest aids in remembering the definition of words, is also thoroughly given in the simplest manner. In this edition the Greek words are spelled in English letters, and can be readily understood by those not familiar with the Greek alphabet. The definitions are clear and full, a characteristic for which this book has always been noted, and it is greatly due to this feature that this work has reached its pre-eminent position. Much explanatory and encyclopedic matters have been added in this edition not found in others. For instance, under the various diseases will be found their symp-

toms; under drugs, their dosage and effect; under poisoning, their symptoms, treatment and antidotes. It is unnecessary to congratulate the editor upon the production of this grand work, because he who gives the amount of labor required for the accomplishment of such a task must feel intense gratification at what he has accomplished. As a gem should always have an adequate setting, so in this instance the highest style of the typographic art has been called into requisition in the mechanical portion of the book. The fortunate possessor of the work before us will have a volume which will prove an ornament to the book shelves of the most fastidious.

LAIRD & LEE'S VEST-POCKET WEBSTER PRONOUNCING DICTIONARY. Laird & Lee Chicago, Ills., 1893. Price, Morocco, 50c.; Cloth, 25c.

This little book is a model of convenience, and is right up to date. It is conveniently carried in the vest pocket; contains 5000 synonyms; catch words correctly spelled; the metric system of weights and measures in tabular form; with the American complete Gazetteer of the World revised to March, 1893; Rules of Etiquette; Marks of Punctuation, and how to use them; Forms of Notes, Due Bills, Receipts, etc.; Use of Capitals; Latin words often met with; Speeches and Toasts for sundry occasions; Parliamentary Rules; Value of foreign coins, and other valuable information. It is a most useful little book.

TREATISE ON OPHTHALMOLOGY FOR THE GENERAL PRACTITIONER. Second Edition. Revised and Enlarged, with 140 Illustrations. By ADOLF ALT, M. D. J. H. Chambers & Co., St. Louis, Mo., 1893. 8vo. \$3.50. (Mailed postpaid by Publishers on receipt of price.)

That this book has been fully appreciated by the general practitioner is evidenced by the fact that the first edition has been exhausted. This, the second edition, comes to us greatly enlarged and well illustrated. The author states in the preface that it is not intended for the specialist, that the minute details which interests the specialist has been left out to give place to a practical and comprehensive exhibit of the principles of ophthalmology which is most necessary to the general practitioner. As a general rule, the general practitioner is not posted well enough to treat the common diseases of the eye, and as a result most of his patients are sent to the specialist, which is often very expensive for the patient and mortifying to him, whereas, if he was more proficient in the commoner diseases

of the eye all this would be avoided. This book has been written for every day use, and he who consults it most will be able to give better satisfaction to his patients and to himself. It treats in a very plain manner all the diseases common to the eye, with descriptions of the most important operations on the eye and eyelids, closing with a chapter on spectacles and drugs most commonly used in ophthalmic practice. It contains something over 300 pages, and is gotten up in first class style. It undoubtedly fills a want badly needed by the general practitioner, and after a careful examination into its merits we can cheerfully recommend it to all as an excellent practical work.

HERNIA. Its Radical and Tentative Treatment in Infants, Children and Adults. By THOMAS H. MANLEY, A. M., M. D., Visiting Surgeon to Harlem Hospital, Consulting Surgeon to the Fordham Hospital, Member of American Medical Association, New York State Medical Association, New York County Medical Association, New York Academy of Medicine, Pathological Society, National Association of Railway Surgeons, etc., etc. Price \$3.00 mailed to any address. The Medical Press Company, 1725 Arch Street, Philadelphia.

The great progress that has been made in the management of hernia, in the past fifteen years, is indeed wonderful. No disease common to the human race should be better understood than the treatment of hernia. The first chapters in this work treats of hernia in the infant, and until they are carefully read very few have any idea how often improper methods are employed in the management of these cases. The abdominal band in infants is totally condemned. Particular stress is laid on the fact that very young children, who are inclined to develop hernia, should be kept in the horizontal position as much as possible, teaching that the erect position tends to produce hernia in many instances. Hernia from infancy to old age is fully considered. When the truss should be used and when it should not be employed is clearly explained. The author stating that in many cases the truss, by its use to prevent hernia, has often accomplished the opposite. The different operations for the cure of this disease is one of the principle and important features of the work. The operations are described in detail and can be followed with ease, and will serve as a useful guide to all contemplating their use. The work is well illustrated with sixty-five engravings and drawings, with a full history of the ancient and modern operations for hernial infirmity of every type in both sexes, along with a full description of the varied anatomical

types of the condition and multiplicity of technique of modern times. It also embraces an entire chapter on cocaine analgesia as a substitute for pulmonary anæsthesia, with a full and complete set of rules for its indications and technique. It is certainly a most useful book.

ESSENTIALS OF MINOR SURGERY, BANDAGING AND VENEREAL DISEASES. Arranged in the Form of Questions and Answers. Prepared Especially for Students of Medicine. By EDWARD MARTIN, A. M., M. D. Second Edition, Revised and Enlarged. W. B. Saunders, 925 Walnut Street, Philadelphia. 1893.

That Saunders' compends are highly appreciated—not only by medical students, but by physicians, also—is evidenced by the fact that they are always greatly in demand. Students who have used them will readily testify to their value and usefulness, and no doubt the editors and publishers have been thanked more than once for their introduction. This little book treats, in a very condensed form, of all the conditions pertaining to minor surgery that physicians in their everyday practice are liable to encounter. The subject of bandaging is considered very full, giving the many kinds of bandages, the method of applying them, with many illustrations. Other points in surgery, such as the use of anæsthetics, antiseptics, cupping, how to apply counter-irritants, etc. The chapters on gonorrhœa and syphilis are excellent. This is the best compilation of the subjects treated I have yet seen. It gives me great pleasure to recommend it to students and practitioners.

ESSENTIALS OF BACTERIOLOGY: Being a Concise and Systematic Introduction to the Study of Micro-organisms. For the use of Students and Practitioners. By M. V. BALL, M. D., Physician to the Eastern State Penitentiary, at Philadelphia. Second Edition. W. B. Saunders, 925 Walnut Street, Philadelphia. 1893.

. This compendium is a concise treatise upon the practical bacteriology of to-day, and has been written especially for the medical student, which he may use in the laboratory. The author states that it is the result of experience gained in the laboratory of the Hygienical Institute, Berlin, under the guidance of Koch and Frankel, and of information gathered from the original works of other German, as well as of French bacteriologists. The first thing that interests the reader when he opens the little book is a short history of the microscope. Bacteria is next discussed, giving their origin, method of examination and staining of culture, etc. The two chapters on pathogenic and non-pathogenic bacteria are well classified and illustrated. The book, as a whole, is well illus-

trated and shows that much labor has been spent in its preparation. Not only will it be of great help to the student, but also the practitioner may easily refresh his memory in this new field by reading its pages.

A NEW ILLUSTRATED DICTIONARY OF MEDICINE, BIOLOGY AND COLLATERAL SCIENCES.

Dr. George M. Gould, already well known as the editor of two small Medical Dictionaries, has now about ready an unabridged, exhaustive work of the same class, upon which he and a corps of able assistants have been uninterruptedly engaged for several years.

The feature that will attract immediate attention is the large number of fine illustrations that have been included, many of which—as, for instance, the series of over fifty of the bacteria—have been drawn and engraved especially for the work. Every scientific-minded physician will also be glad to have defined several thousand commonly used terms in biology, chemistry, etc.

The chief point, however, upon which the editor relies for the success of his book is the unique epitomization of old and new knowledge. It contains a far larger number of words than any other one volume medical lexicon. It is a new book, not a revision of the older volume. The pronunciation, etymology, definition, illustration, and logical groupings of each word are given. There has never been such a gathering of new words from the living literature of the day. It is especially rich in tabular matter, a method of presentation that focuses, as it were, a whole subject so as to be understood at a glance.

The latest method of spelling certain terms, as adopted by various scientific bodies and authorities, have all been included, as well as those words classed as obsolete by some editors, but still used largely in the literature of to day, and the omission of which in any work aiming to be complete would make it unreliable as an exhaustive work of reference.

The publishers announce that, notwithstanding the large outlay necessary to its production on such an elaborate plan, the price will be no higher than that of the usual medical text-book.

A NEW MEDICAL DICTIONARY.

A completely new Medical Dictionary is announced for early publication by Lea Brothers & Co. The author, Dr. Alexander Duane, of New York, is already widely known as a medical expert

for Webster's International Dictionary. His new work has been drafted to supply students with all desired information concerning the words they will meet in their course of reading, and as the vocabulary has been selected most liberally, the work will be of value to practitioners also. The pronunciation of each word is given by a simple and obvious phonetic spelling; then follows the derivation, an unexcelled aid to memory, and finally a full definition. Descriptive matter has been appended to such words as cannot be adequately explained by simple definition. Thus diseases are described, and their symptoms and treatment are given; drugs are followed by their properties, effects, doses, etc. Extensive tables of bacteria, doses, etc., are placed in the alphabet most conveniently for reference. A work of real value is promised, and we shall take an early opportunity of reviewing it in these columns.

OPERATION BLANK. By W. W. KEEN, M. D. W. B. Saunders, publisher, Philadelphia, 1893. Price 50 cents.

This tablet contains 50 sheets and is intended to be used for operations, giving full particulars as to the preparation of patient's room and bed; also a list of medicines, instruments, dressings, etc., necessary for the operation. It is quite useful in preparing for an operation.

Therapeutics of Yawning.

The practice of yawning is highly recommended by disciples of Delsarte as a healthful and improving exercise. In support of this theory it may be said that cats and dogs are persistent and all-embracing yawners, and are generally healthy. A cat yawns not only with her mouth but with her head and four legs as well. One should yawn slowly, says the Delsartean, and with the best possible breathing, thus refreshing the muscles of head, throat and, indeed, of the entire body. If not naturally disposed to yawning, the following recipe may be of use: "Droop the eye-lids as if sleepy, at the same time rolling the eye-balls slightly upward, though without closing the eyes; repeat the movement some half dozen times, and you will find yourself beginning to yawn." Another method, which is effectual in setting a roomful of people to practicing this excellent diversion, has not the stamp of the Delsartean system, and is doubtless familiar to many: Hold a pair of scissors in your hand and, without calling attention to them, slowly open and close them again and again.

Selections.

The Berlin Sewage Farms and Typhoid Fever.

Professor Virchow, according to the Medical Work for February 10th, referred, at a meeting of the Berlin Medical Society, to the occurrence in the summer and fall of 1891 of several cases of typhoid fever among the men employed on the sewage farms in the neighborhood of Berlin. While the affected men had been in the habit of drinking the water from the drains, they also lived in a locality where typhoid fever prevailed. This was the first time that typhoid had been observed in villages near these farms, as they had remained free even when typhoid was epidemic in other localities.

Eight cases were reported in the village where the fever first appeared. The drinking water used by the patients was manifestly impure, but no typhoid bacilli were found in it; since the water supply has been purified no other typhoid cases have occurred.

Although Pasteur stated that sewage farms would assist in the propagation of infectious diseases, especially of anthrax, as the anthrax bacillus was unaffected by water, not a single case of infectious disease has been traced to infection acquired from the sewage farms in Germany. Virchow stated that he insisted on the closest supervision in the management of these farms, each having attached to it a medical man, who was directed to report every case of disease to the authorities, with all information likely to throw light on the nature and origin of the affection. The bacteriological examination of the effluent water was made by two physicians, and they had never been able to demonstrate the presence of Eberth's bacillus in it.

A slight epidemic of cholera nostras had occurred in one of the villages, affecting the inmates of a prison that were employed on the farms. The disease broke out in one of the sheds in which the prisoners were confined, attacking twenty-one men.

An objection had been made that cattle fed on the crops raised on these farms might become infected because the roots of the grass were in contact with the sewage; but cattle that were fed on nothing but these crops for several months remained in excellent condition.

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Laird & Lee's Vest Pocket Webster Dictionary.

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Ten Tests for Death.

It is the rarest thing in a physician's experience to be placed in any doubt as regards whether a person is dead or not. The cessation of breathing, the absence of audible heart beat, and the physiognomy of the patient are enough. Every now and then, however, we are called upon to give some absolute test of death which is not connected with the heart beats or the respiration. One of these criteria is the so called "diaphanous test," which consists of an absence of the translucence seen in living people when the hand is held before a strong light with the fingers extended and in contact. An English physician relates in the *Lancet* an interesting experience with this test.

He was called to see an old lady who was believed to be dead, but whose countenance looked natural and life like, the eyes being open. The family, being extremely anxious, urged that all the tests of death be applied, and this was done in the following order:

1. Heart sounds and motion entirely absent, together with all pulse movement.
2. Respiratory sounds and movements absent.
3. Temperature of the body taken from the mouth the same as that of the surrounding air in the room, 62° F.
4. A bright needle plunged into the body of the biceps muscle (Cloquet's needle test) and left there, shows on withdrawal no sign of oxidation.
5. Intermittent shocks of electricity at different tensions, passed into various muscles and groups of muscles, gave no indication whatever of irritability.
6. The fillet test applied to the veins of the arm (Richardson's test) causes no filling of the veins on the distal side of the fillet.
7. The opening of a vein to ascertain whether the blood has undergone coagulation shows that the blood was still fluid.
8. The subcutaneous injection of ammonia (Monte Verde's test) cause the dirty brown stain indicative of dissolution.
9. On making careful movements of the joints of the extremities, of the lower jaw, and of the occipito frontalis, rigor mortis is found in several parts.

Thus of these nine tests, eight distinctly declared that death was absolute, the exception, the fluidity of the blood, being a phenome-

non quite compatible with blood preternaturally fluid and at a low temperature, even though death had occurred.

10. There now remained the diaphanous test, which we carried out by the aid of a powerful reflector lamp yielding an excellent and penetrating light. To our surprise the scarlet line of light between the fingers was as distinct as it was in our own hands subjected to the same experiment. The mass of evidence was of course distinctively to the effect that death was complete; but, to make assurance doubly sure, we had the temperature of the room raised and the body carefully watched until signs of decomposition had set in. I made a visit myself on the succeeding day to assure myself of this fact.

This experience shows that the diaphanous test is not a trustworthy one.—*Med. Rec.*

The Punishment for the Crime of Producing Abortion.

In England and Ireland the punishment is penal servitude for life, or a less term. Should the mother die, the crime becomes murder, which may be punished by death. In Scotland, says the *Lancet*, the punishment is arbitrary; in France, Spain, the German Empire, Austria, Hungary, Italy, Russia, Norway, Sweden, and Denmark—in short, throughout the whole of Europe—the crime is punished with imprisonment for from six months to twenty years, or for life. In Sweden the penalty is death if the mother dies; and in Russia the mother, if a consenting party, may be exiled to Siberia; in the Dominion of Canada the penalty is imprisonment for life; in Nova Scotia, Quebec, Ontario, British Columbia, and in Prince Edward Island it varies from imprisonment for two years to for life; in New Brunswick the penalty is death; in Australia and New Zealand the punishment is very severe, ranging from two years' imprisonment to penal servitude for life; in the United States it is punished with fines ranging from \$100 to \$5000, with imprisonment for long periods, and with death.—*Med. Record.*

Happiness.

The best definition of happiness is that given by a French woman, who says it is a state of constant occupation for a desirable object, with a sense of continued progress. It is this condition which makes reformers the happiest people in the world.

A New Suggestion as to the Surgical Treatment of Hemorrhoids.

Becelaere (Medical Record, No. 1186, 1893,) proposes a method of operating for hemorrhoids which, though he has not put it in actual practice, is sufficiently ingenious to justify a trial. He bases his confidence in the efficiency of this method on his knowledge of the normal disposition of the hemorrhoidal veins which traverse the sphincter muscle and underlie the mucous membrane in about the same way as a hernial gut hangs out of the inguinal canal into the skin. If a more complete adhesion of the mucous membrane to the underlying muscular layer can be secured, thus destroying the submucous connective tissue, the conditions favorable for the formation of hemorrhoidal masses can be removed, and a radical cure would probably result. Hence it is proposed to detach in a circular manner the mucous membrane of the sphincters, turning down a mucous cuff, which should forthwith be returned to its former situation and secured by the necessary number of stitches. Ultimately there would result from this cicatricial tissue just sufficient to secure a more close approximation of the mucous and the muscular layers of the lower bowel, thereby destroying at once the venous loops under the mucous membrane and the connective interspace wherein they become dilated. Where the knife is contra-indicated, perimarginal ignipuncture might be of service. This *modus operandi* may be performed as follows: After insuring the benefit of all usual antiseptic precautions, the surgeon should paint over the previously shaved regions a sufficient coat of simple colodion, which he should allow to thoroughly solidify before proceeding any further. This is an excellent means of avoiding the disagreeable effects of radiating heat. A metallic dilator of convenient size, and filled with cold water, may further be inserted within the anus of the patient, postured in the exaggerated lithotomic decubitus. The surgeon then slowly passes the smallest point of a thermo-cautery, at a brown heat, right underneath the mucous membrane of the rectum, until the upper sphincter is reached. Withdrawing the instrument, he may reinsert it at another point, about a centimetre, or half an inch, distant from the previous puncture. It is a question to be decided only by actual experience how many punctures may thus be made at one sitting; although *a priori* no reason seems apparent for not completing the

whole operation. A large sized galvano-caustic needle, constructed *ad hoc*, might prove more useful even than Paquelin's instrument, because it could be introduced with the finger in the rectum, the necessary current being turned on with the cautery *in situ*, thus avoiding the danger of perforating the mucous layer.

Public Water Service in Relation to Typhoid Fever.

The Practitioner for January publishes a *resume* of two reports that were recently issued by the Medical Department of the Local Government Board on outbreaks of typhoid fever in different localities that could be traced to infection from a common water supply. The reports seem to show, first, that a definite and serious danger of typhoid fever and of allied diseases, such as cholera, attaches to the use of water derived from lands that are either subject to manuring with human excreta or polluted by means of drainage from dwellings or from streams that are liable to pollution with sewage or human excreta. Second, that there seems to be abundant evidence pointing to the fact that, while water supplies from such sources afford well recognized means for the maintenance of typhoid fever as a current infectious disease among its consumers, there is further risk of an exceptional prevalence of that disease when the manure used on the ground from which the water is gathered, or when the sewage reaching the stream, comes from dwellings the excreta from which contains the specific contagion of typhoid fever; and this especially when, by reason of exceptional rainfall or otherwise, this contagion is conveyed in bulk into the water drawn into the reservoirs and service pipes from which the inhabitants are supplied. Third, that measures should be adopted to prevent the access of house drainage into the water collected from such gathering grounds and streams, and also to prevent any portion of a gathering ground that serves the purposes of collecting a town water supply from being so used or cultivated as to need manuring in the way described.

Herpes Zoster.

Dr. Ohmann-Dumesnil, in a valuable article on herpes zoster in the Quarterly Atlas of Dermatology, recommends Peacock's Bromides as a nerve sedative when the prodromic symptoms appear.

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border, with his signature. Never sold in bulk.

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GENITO - URINARY DISEASES.

A Scientific Blending of True Santal and Saw Palmetto in a Pleasant Aromatic Vehicle.

SPECIALLY VALUABLE IN

Prostatic Troubles of Old Men—Pre-Senility,
Difficult Micturition—Urethral Inflammation,
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Positive Merit as a Rebuilder.

DOSE:—One teaspoonful four times a day.

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ANTI-PYRETIC

ANALGESIC

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This new synthetic product, whose base is a coal tar derivative, possesses all the advantages of the most approved Anodyne, Nervine, Sedative, or Hypnotic, and can be used without danger of untoward after effects. Its most efficient action is fully set forth in a circular which we shall be pleased to send together with a sample of the product to any physician making application.

Detroit Pharmacal Co.,

Manufacturers and Jobbers of Physicians' Supplies,

DETROIT, MICH.

For sale by Burwell & Dunn, Charlotte, N. C.

Doctor, Have You

ever wished for an antiseptic equal in action to Iodoform, and free from its characteristic odor?

If So

we would be pleased to send you a sample of IATROL. It is

Superior to Iodoform

in action, and is absolutely odorless and non-toxic.

IATROL,

from the Greek, meaning to heal or dress a wound—is an Oxylo-do-Menthylo-Analide, obtained by the action of Nascent Iodine upon one of the Aniline group.

Three times lighter

than the iodoform, the economy of its use as a dusting powder is evident.

Clinton Pharmaceutical Co., *Manufacturing Chemists,*
SYRACUSE, N. Y.

Hypodermic Medication—Dr. J. A. Washington, and Not Dr. Warren, Was the Originator.

H. O. HYATT, KINSTON, N. C.

The claim made in the recent eulogistic accounts of Bey Warren, that he was the inventor of hypodermic medication has attracted considerable attention in North Carolina.

In a biographical sketch of Dr. James Augustus Washington, the writer made the claim for him that he was the originator of hypodermic medication. The sketch was published in the *Herald of Health* of October, 1892, and a copy was mailed to every doctor and newspaper in the State.

For the benefit of those who desire to know the truth about the matter, we think it needful to give some account of the steps towards the development of this method.

In the history of human progress no great invention has leaped into perfection or has been the sole work of any one man. First conceptions are generally crude, and they are built upon by others until finally they are brought to a state of perfection, many men—and often many generations—being required to elaborate and perfect a great invention. As examples we might site the pulicon of Hypocrates, which it took twenty centuries to perfect in the aspirator of to-day, and the lovers' whispering cord of the Egyptians, perfected in the modern telephone.

The following is a concise history of hypodermic medication, taken from Bartholow's work on "Hypodermic Medication":

"With the opening of the present century began attempts to utilize the skin as a medium for the introduction of medication into the blood. Crestien, of Montpellier, who is also celebrated for his researches on the medicinal value of the salts of gold, published in 1804 a treatise on the introleptic method. This work was translated into German by Bischoff the following year. Various papers of minor importance appeared in French and German literature during the first quarter of the century. Lambert in 1828, and Ritcher in 1835 discussed in more or less elaborate essays the endermatic method, and Madden, of Edinburgh, in 1838 published an experimental inquiry into the physics of cutaneous absorption. It is in a high degree probable that Madden's research had its inspiration in the recent developments in regard to the curative

effects obtained by the inoculation and implantation of medicines. In 1836 Lafarge had published the results accomplished by this method; that is, the insertion of morphine in the skin along the trajectory of the nerve affected with neuralgia. Lafarge invented a needle trocar with which he could effectually deposit morphine, in the form of a paste, in the skin.

"Ascribing the curative results of this practice to the pustules at the site of inoculations, he studied with care their development and structure. Although it was early discovered that the benefit derived from the inoculations of morphine was in no way related to the pustules produced, the good results of the method were most conspicuous and attracted widespread attention at the time. Val-lieux, Cazenave, Malgaigne, Hayem and others in France, Langenbeck, Bertrand and Van Brans in Germany, Rynd in Dublin, Drs. Washington and Taylor in New York, repeated the practice of Lafarge, in some instances modifying the method. These observers, and probably the most of those who practiced the inoculations, were not concerned, as was the originator of the method, as to the mode of development and special forms assumed by the pustules, but referred the curative effect to the action of the morphine upon the sensory nerves of the part. It is not surprising, then, that modifications in the mechanical details were soon introduced."

In 1839 Drs. Isaac Taylor and Jas. Aug. Washington, of New York, inserted morphine for the cure of neuralgia, instead of using a paste and trocar as did Lafarge. Dr. Washington used an Anel's eye syringe, which only has to have the point sharpened to make it a modern hypodermic syringe. Dr. Taylor, many years ago, gave the credit of using the syringe to his co-laborer, Dr. Washington, who was a native of Kinston, being born here in 1803. Dr. Washington had visited Paris twice prior to this time, and had made reputation on both continents. Unfortunately he had never found time, or was not inclined, to write of his work. Lafarge's experiments were repeated in this town by Mr. John C. Washington, a brother of Dr. Washington.

Dr. Washington died in 1847, and scientific surgery lost one of the greatest men this country ever produced.

In 1843, Wood, of Edinburgh, in imitation of Lafarge, began experiments upon the subcutaneous injection of morphine, using a crude syringe similar to the Anel. It was not until 1855 that

Dr. Alex. Wood published an account of his method in the *Edinburg Medical and Surgical Journal*.

Dr. Warren claims that he originated hypodermic medication in 1850. Dr. Warren may not have known of Dr. Washington's or Dr. Wood's prior use of the hypodermic syringe when he first used or made claim to its invention.

Whenever the world is ripe for an invention or discovery, somebody makes it, and often several independently of each other.—*Kinston (N. C.) Free Press*.

“Antiseptic Treatment of Pulmonary Tuberculosis by Gaseous Inhalation of Spirits of Turpentine, with Iodoform or Iodol.”

This is the title of a paper read before the Acadamic de Medicine de Paris, by M. Delthil, who therein drew the following conclusions: 1. It is physiologically indicated to endeavor to obtain direct asepsis of the diseased lungs by means of non-poisonous antiseptic gaseous inhalation. 2. The volatile oils of turpentine with iodoform or iodol seem to fulfill this indication. 3. The absorption of the drugs is proved by the presence in the urine of iodine. 4. Under the influence of these inhalations, the cough and the secretion diminish, the appetite improves and the morbid process abates to such an extent that recovery often takes place in apparently hopeless cases, 5. This treatment does not prevent the use of the various hygienic, dietetic and remedial measures indicated in this disease. The inhalation is used as follows: In an inhaler of the capacity of one quart is placed the following mixture:

R. Iodoform or iodol.....	3 i-ii
Ether sulphuras.....	3 v
Ether lavender.....	3 iii
Essence turpentine.....	3 xiss

M. S.—To be inhaled as much as four hours daily, morning and evening and several times during the day, in seances of from fifteen to twenty minutes. The inhalation may be warmed to increase evaporation, by placing the inhaler in a bath of 30° C. In order to increase the amount of iodoform disengaged, a gramme of iodoform or iodol may be added every second day. The turpentine dissolves the iodoform or iodol if a little ether is mixed with it; the commercial spirits of lavender deodorises the iodoform.—*Pacific Medical Journal*.

Uterine, as a Cause of Breast Disease.

Dr. Routh sent to the International Congress at Brussels a brief *resume* of three cases illustrating the relation of the uterus as a causative of breast disease. In the first there was immense hypertrophy of the parenchyma of both mammæ from uterine irritation; the second, hypertrophy of the cervix, in whom both mammæ were as big as a man's head but large from the size of the lacteal tubes, and not involving the parenchyma. Amputation of the cervix immediately brought about absorption of the mammæ to their normal size. The third was a well marked cancer of the breast, which he amputated. But although the greater part of the wound healed, for weeks small cancerous points kept cropping up. The other breast becoming painful, Dr. Routh insisted upon a vaginal examination, and found the uterus intensely ulcerated inside the cavity and outside on the cervix. He cured the ulceration, and no further cancerous points made their appearance. He considered, therefore, that in all cases of mammary disease the uterine organs should be examined and treated, if found diseased. Baker Brown believes that many cases of enlarged breast could be traced to irritation of the vulva or cervix uteri.—*The Brit. Gyn. Journal.*

The Palmo-Planter Sign of Typhoid Fever.

Dr. Filipovitch, of Odessa, thinks he has discovered a diagnostic sign of typhoid fever that may prove serviceable in cases where at first the usual pathognomic symptoms are wanting. It is a peculiar callous look and an orange-yellow or saffron-yellow hue of all the prominent parts of the palms of the hands and the soles of the feet—parts which, as is well known, are more or less rosy in health and become bluish in cases of cyanosis. The phenomenon is explained by the enfeebled action of the heart, a diminished amount of blood in the capillaries, and the dryness of the skin. He has observed it in every case seen by him during the last two great epidemics of typhoid fever in Odessa, and his observation is confirmed by another Russian physician, Skibnevsky. The sign disappears as soon as convalescence begins.

Dr. Filipovitch's article appeared in the *Revue Medicale*, for August 20th, and an abstract of it is given in *Lyon Medicale*, for September 10th.

Physicians who have been disappointed in the use of favorite Prescriptions have the remedy in their own hands. Prescriptions and orders should read
"Wm. S. M. Chem Co."

GREEN: DRUG FLUID EXTRACTS

CHARACTERISTICS:

UNIFORM STRENGTH, CONVENIENCE
OF ADMINISTRATION, NON-LIABILITY TO
DETERIORATION BY AGE, POSITIVE THERAPEUTIC EFFICACY.

The WM. S. MERRELL CHEMICAL CO. will not hold themselves responsible for the identity of Fluid Extracts, filled out by druggists from bulk stock, even though the written label may read "Merrell's." CAUTION.—Accept original packages only.

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FROM		SALICYLIC ACID.
WINTERGREEN OIL.		TRUE
		SALICYLATE SODIUM

IT IS ACKNOWLEDGED THAT

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SALICYLIC ACID
AND ITS
SODIUM SALT

are slow but certain poisons.
produce symptoms closely resembling delirium tremens.
patients become delirious.
dangerous to human life.
have to be watched and not to be trusted.
retard convalescence.
should not be administered internally, however much they may have been dialized or purified.

Order and Prescribe  { ACID SALICYLIC—True—MERRELL.
SODIUM SALICYLATE—True—MERRELL.

FLUID HYDRASTIS.

A solution of definite strength and reliability, representing all the valuable constituents of the drug—the offensive and irritating resins being rejected. The only perfect representative of the drug in the fluid form within reach of the medical profession. Though often attempted it has never been successfully imitated. Send for our pamphlet on "Hydrastis and its Preparations."

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Anderson Antiseptic Vaginal Capsules

FOR THE LOCAL TREATMENT OF

DISEASES OF THE VAGINA AND UTERUS.

The most efficient and cleanly means of introducing remedies into the vagina. Antiseptic, perfectly soluble and reliable. Each capsule contains an absorbent tampon which may be medicated with any remedy indicated.

WHEN?

In all cases of acute and chronic inflammation of the lining of the womb, gonorrhoea syphilitic, purulent and leucorrhoeal discharges.

Relaxation of the uterine ligaments and weakening of the vaginal walls.

Falling of the womb. Ulceration of the os uteri.

Disease of the ovaries and fallopian tubes.

Painful and scanty menstruation.

Where the womb is extremely irritable and neuralgic.

HOW?

Moisten the tampon with the remedy, draw it back into the capsule by means of the linen thread, replace cap and insert.

WHAT?

The result is a grateful relief to the sufferer and satisfaction to the physician. No handling of disagreeable drugs; no loss of medication in the introduction, no soiling of linen.

THE VERDICT!!

RATIONAL.

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CLEANLY.

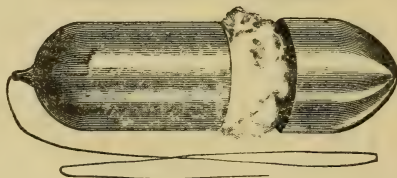
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Three Sizes.

No. 1 Small

No. 2 Medium

No. 3 Large



Tampon.

Absorbent Cotton,
Oulo-Kutun (Wool
and Cotton) or Wool,
as desired.

Exact size of No. 2 Capsule.

Any size by mail postpaid on receipt of price, 60c. per box.

VALUABLE AS A PESSARY.

Extract from a letter from Dr. A. J. Howe, Professor of Surgery, Eclectic Medical Institute, of Cincinnati, O.

"The Anderson's Vaginal Capsules charged with tampons of Oulo-Kutun are a convenient vehicle and medium for introducing douches or medicated fluids into the vagina, and retains them there. Astringent, sedative and antiseptic liquids may be thus employed, instead of the syringe as an implement, or a speculum."

Respectfully,

A. J. HOWE, M. D.

 Send for printed matter containing valuable information.

THE HALL CAPSULE CO.

Manufacturing Chemists.

CINCINNATI, OHIO.

Have you seen our "Ruby Capsule" for disguising the physical appearance of prescriptions, and for use when two medicines are to be taken in alternation? Send 10c. for trial box of 100.

A Family Laxative.

Physicians are not inclined to recommend self-medication to the laity. Yet there is one need which they are almost unable to supply. We refer to "the family laxative." The family physician is able to prescribe for the most complicated and obscure of maladies and yet is often puzzled to know just what to give when asked for a remedy which can be kept in the house for family use as a laxative, that shall be effective, free from danger, and not unpleasant to take. When absent on our summer vacation we were asked by four different parties, representing as many families, what we thought of the "Syrup of Figs." Not one word did we volunteer on the subject, and we were somewhat surprised to find that there was this small token of the very general use of that preparation. These parties said they derived more benefit from it and found it more pleasant to take than anything of the kind they had ever used. The simple question with them was, is it a dangerous compound? We informed them that its active ingredient was a preparation of senna and that it was entirely free from danger. With this assurance they volunteered the information that they should continue to keep it in the house.

The therapeutical properties of senna are so well known that comment on this seems unnecessary. It might be well to notice, however, that Bartholow says it is "a very safe and serviceable cathartic," and it is "highly prized as a remedy for constipation." He also makes the important observation that its use "is not followed by intestinal torpor and constipation."

The simple truth of the matter is, we have altogether too few preparations which we can recommend to our families as effective laxatives. But the California Fig Syrup Co. has one of the most desirable combinations for this purpose with which we are familiar. The Fig Syrup Co. gives to the profession the composition of this preparation, therefore there is no secret about it; the persons who use this laxative speak in the highest terms about it; and we are pleased to notice that a large number of physicians are prescribing it. Viewed from the narrowest and most selfish stand point the physician will lose nothing by recommending such a preparation as Syrup of Figs to his patients; while viewed from the highest stand point of doing the best possible by those who place themselves in our care, we would say the profession cannot do better than give their indorsement to such a preparation.

Lawson Tait on the Treatment of Peritonitis.

Years ago I was driven to the determination to discontinue the use of opium by the mouth after abdominal operations, for two reasons; first, its action on the intestines is most certainly to modify and even to suspend vermicular movements; and secondly, it masks the real condition of the patient. One dose of morphine, given under the skin immediately after the operation, is all that my patient ever gets, and the bulk of them do not get that.

Regarding the intolerable thirst that follows the opening of the peritoneal cavity, I have come to look upon it not as an indication for the administration of fluids, but rather for withholding them. Ice is one of the things that should be banished absolutely from the sick room. It never acts in any other way than to increase thirst.

Again, if nausea sets in on the third or fourth day, or at any time, all food (and in that I include water) is absolutely stopped for twelve hours or even longer if necessary. I was driven to this by the uniform experience that all drugs employed for the arrest of vomiting were absolutely futile; that any food given came back only altered by biliary admixture. Further, I was influenced by the perfect certainty that nothing could possibly be digested or absorbed by the stomach so long as bile was being poured into it.

I have therefore a belief that the starvation and withholding of fluid prevents the mechanical stasis of the circulation in the intestinal coats, which appear to me to be the initial stage of the fatal process of peritonitis, and this preventive measure I endeavor to assist by stimulating the peristaltic movement, I have tried a vast number of different kinds of enemata—some suggested by own thought and others suggested by ingenious friends—but I have always gone back to soap and turpentine. It is the business of any nurse watching one of my abdominal sections to note every six hours a set of four conditions—the pulse, the temperature, the occurrence of distention, and the passage of the flatus *per anum*. So soon as the latter is freely and naturally established, our anxiety ends, though our watchfulness is unremitting. The want of our passage for twenty-four hours after an operation, especially if accompanied by the slightest suspicion of distention, is dealt with without fail by the nurse herself, on her own responsibility, by the

administration of a turpentine enema. If the turpentine does not answer, the nurse reports, and a mild saline purgative is ordered—generally a seidlitz powder—and this is repeated every four hours until it acts. If the distention increases we never rest until we have had the bowels moved, and then our anxiety is nearly always at an end and our efforts rewarded by recovery. But above all things there must be no time lost, and nobody who may be called into consultation by anxious friends must be permitted to write a prescription and try some favorite mixture.

When called into a case of well-established peritonitis I always urge a trial of this treatment, because the stage may not have passed at which it may still be effective, but the chances are that it has. I have never said that the purgative treatment will cure peritonitis, for peritonitis, once it is completely established, is a practically incurable disease, and almost uniformly fatal. Of this I am certain, if you subject the patients (not the peritonitis) to the purgative treatment, the number who will go on to incurable peritonitis will be fractional compared to what will be the result if they are left alone or submitted to any other treatment.

The practical outcome of my empirical experience is this, that the purgative treatment of peritonitis or threatening peritonitis, if it be promptly brought to bear on the case, will gain the all-important time, which will eventually turn the scale in favor of the patient.—*British Medical Journal*.

Obesity and Fatty Degeneration.

G. H. Thompson, A. M., M. D., Professor of Materia Medica, St. Louis College of Physicians and Surgeons, reports several cases in which Walker's phytoline was productive of very good results in reducing flesh and weight and ameliorating the symptoms due to excessive accumulation of fat. In concluding his paper, he asks: "The next question is, How does phytoline cause the reduction of fat? This, I am at present unable to say. I have, however, noticed that the faces seemed to be considerably more rich in fatty materials than is normal, which condition cannot be attributed to indigestion, as in all other respects digestion was normal. Perspiration and urine were apparently unchanged by the action of the drug.

"Official preparations of the root have been used with little or no result, except to cause continued nausea, vomiting, and diarrhœa.

Phytoline does not cause nausea in the ordinary dose, and, though slight laxative effects have been observed from it, I have never seen a pronounced case of diarrhœa. The appetite is sometimes slightly diminished, chiefly in the morning. It seems to me to be specially indicated in all diseases characterized by fatty degeneration of internal viscera, especially of the heart and liver. Those who choose to use it for its cosmetic effects in reducing fat will also find in it a serviceable adjunct to properly restricted diet and exercise."

Typhoid Fever from a Dairy Farm.

The necessity for the sanitary supervision of dairy farms has been recently shown by a local epidemic of typhoid fever at Oakland, Cal. The drainage of the place follows the natural slope from the foothills to the bay. The San Francisco Examiner states that within the two weeks ending July 2d more than three hundred cases of typhoid fever had been reported to the local board of health, although until within two months there had not been a case of typhoid fever in the city. At the beginning of the latter time a case of typhoid fever occurred at a dairy farm, and the attending physician states that he exercised every possible precaution. The patient recovered in some six weeks, and ten days subsequently another case of typhoid occurred at the dairy and simultaneously several cases appeared in Oakland. Within a week after the appearance of the first case in the latter city more than two hundred cases were developed. It does not appear that the attending physician warned the city health authorities or took effective measures to protect those to whom milk from this farm was supplied. The health officer of Oakland reported that more than three-fourths of the cases were found in families supplied with milk from this dairy. The dwelling house in which the original cases occurred is situated near a tank or pool, and twenty feet higher than this receptacle; through the grounds of the farm passes a small stream of water, very dirty and greatly defiled with animal excreta and even the rotting remains of dead animals, bones, etc.; the water from this stream runs into the tank; and from this tank was taken the water with which the milk cans were washed.

Dr. Willis King says that during his boyhood three animals were known by the odor: a billy goat, a skunk and a doctor.

THE BEST ANTISEPTIC
FOR BOTH INTERNAL AND EXTERNAL USE.
LISTERINE.

Non-Toxic, Non-Irritant, Non-Escharotic—Absolutely Safe, Agreeable and Convenient.

FORMULA.—LISTERINE is the essential antiseptic constituent of Thyme, Eucalyptus, Baptisia, Gaultheria and Mentha Arvensis, in combination. Each fluid drachm also contains two grains of refined and purified Benzo-boracic Acid.

DOSE.—Internally: One teaspoonful three or more times a day (as indicated), either full strength, or diluted, as necessary for varied conditions.

LISTERINE is a well-proven antiseptic agent—an antizymotic—especially useful in the management of catarrhal conditions of the mucous membrane, adapted to internal use and to make and maintain surgical cleanliness—asepsis—in the treatment of all parts of the human body, whether by spray, injection, irrigation, atomization, inhalation, or simple local application, and therefore characterized by its particular adaptability to the field of

PREVENTIVE MEDICINE—INDIVIDUAL PROPHYLAXIS.

LISTERINE destroys promptly all odors emanating from diseased gums and teeth, and will be found of great value when taken internally, in teaspoonful doses, to control the fermentative eructations of dyspepsia, and to disinfect the mouth, throat and stomach. It is a perfect tooth and mouth wash,
INDISPENSABLE FOR THE DENTAL TOILET.

DISEASES OF THE URIC ACID DIATHESIS.

LAMBERT'S LITHIATED HYDRANGEA.

RENAL ALTERNATIVE—ANTI-LITHIC.

FORMULA.—Each fluid drachm of "LITHIATED HYDRANGEA" represents thirty grains FRESH HYDRANGEA and three grains of CHEMICALLY PURE Benzo-Salicylate of Lithia. Prepared by our improved process of osmosis, it is INVARIABLY OF DEFINITE and UNIFORM therapeutic strength, and hence can be depended upon in clinical practice.
DOSE.—One or two teaspoonfuls four times a day (preferably between meals.)

Close clinical observation has caused Lambert's Lithiated Hydrangea to be regarded by physicians generally as a very valuable Kidney Alternative and Anti-lithic agent in the treatment of

Urinary Calculus, Gout, Rheumatism, Cystitis, Diabetes, Hæmaturia, Bright's Disease, Albuminuria, and Vesical Irritations Generally.

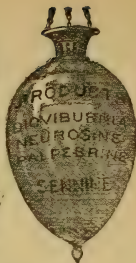
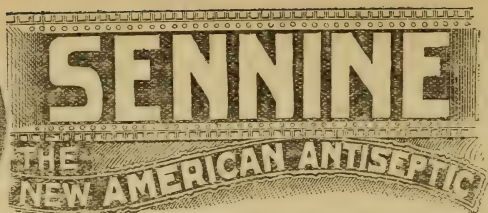
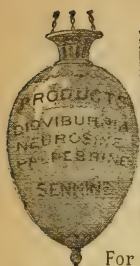
REALIZING that in many of the diseases in which LAMBERT'S LITHIATED HYDRANGEA has been found to possess great therapeutic value, it is of the highest importance that suitable diet be employed, we have had prepared for the convenience of physicians

DIETETIC NOTES,

suggesting the articles of food to be allowed or prohibited in several of these diseases. A book of these Dietetic Notes, each note perforated and convenient for the physician to detach and distribute to patients, supplied upon request, together with literature fully descriptive of LISTERINE and LAMBERT'S LITHIATED HYDRANGEA.

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For Internal and External Use in Medicine and Surgery.

COMPOSITION—A Chemically pure product of Boracic Acid and Phenol.

PHYSICAL PROPERTIES—A very fine White Powder, Odorless, Slightly Astringent, and of Sweetish Taste.

MEDICAL PROPERTIES — Antiseptic, Antizimotic, Bactericide, Deodorant, Disinfectant.

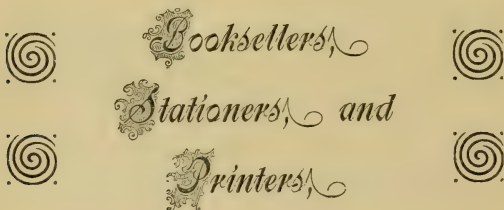
COMPARATIVELY INEXPENSIVE—Five parts of SENNINE dissolved in 100 parts of water, ($2\frac{2}{3}$ make 4 pints) is sufficiently strong for an antiseptic wash.

FREE FROM TOXIC AND IRRITATING EFFECTS, Therefore preferable to Carbolic Acid, Bichloride of Mercury, Iodoform, etc.

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WESTERN NORTH CAROLINA.

Abstracts.

The Answered Prayer.

Into this work-a-day world came a vision,
Pure and bright as the glimmer of day;
Tears filled the eyes of the pitying watchers,
'Round a death-bed where a sick mother lay.
A minister kneeling devoutly beside it,
Was praying to heaven, to God who is just,
To sprinkle this soul with life-giving waters,
And remember humanity's weakness for lust.
To temper his mercy with love and compassion;
To forgive and to save this poor girl who thus fell
From a star-studded, pure, and radiant heaven,
To the blackest, most desolate, regions of hell.
And likewise he most earnestly prayed for the baby,
Who had come to this cold world of sin and despair;
To keep it unsullied; protect and watch o'er it,
And now, God, we leave them to thee and thy care.
And somehow, in some way, the prayer drifted upward,
Straight from the lips of the minister given;
And God heard the prayer, for a little bird told me,
That the child and its mother rest safely in heaven.

Kellettville, Pa.

L. A. VERNE A. BARBER, M. D.

Results of Modern Medicine.

At the Glasgow University medical graduation ceremony last week a valedictory address was delivered by Professor McKendrick, who dealt with the development of the medical art during the last thirty years. In concluding the Professor said that the total result of the progress of medical science during the period in question might be briefly summed up thus :

1. Thousands of lives saved annually by preventive medicine.
2. Greater accuracy in diagnosis, and a sounder knowledge of the natural history of disease.
3. More rational treatment.
4. Many diseases caused to pass through their stages more speedily, thus saving time.
5. Better means of relieving pain and suffering.
6. Making disease, even when incurable, more tolerable, and at last smoothing the passage to the Elysian Fields.—*Med. Times and Hosp. Gazette.*

The Typhoid Fever Epidemic at Ironwood, Michigan.

The Journal of the American Medical Association for July 8th publishes a letter from Dr. Henry B. Baker, the secretary of the Michigan State Board of Health, regarding an epidemic of typhoid fever at Ironwood, a town of about 12,000 inhabitants. The first typhoid fever cases were reported during the week ending May 20th, when 15 persons had been affected; for the week ending May 27th, 30 new cases; the week ending June 3d, 30 new cases; the week ending June 10th, 125 (estimated) new cases. Up to the latter date only 6 deaths had occurred. The epidemic was ascribed to a number of causes; to the general water supply; to water from wells that had in the past originated autumnal outbreaks of typhoid; to the digging up of filth saturated soil; to the stirring up and removal during the spring of great quantities of filth that had accumulated during the winter; to a present filthy condition of some gutters and alleys; to atmospheric influences; and to some influence connected with the Ironwood high school. Dr. Baker found no sudden change in any of these conditions that was sufficient to account for the epidemic, except that there had been an unusual overflow in the vicinity of the pumping station for the general water supply. The reservoir had overflowed and probably been contaminated by the excreta of the privy for the engineer's family. [There is no evidence that any member of the family had typhoid fever.] The intake pipe of the pumping station became clogged so as to be useless for several days, and, as it was impossible to filter the water, a break had been made in the reservoir on the down stream side. A sample of the water was examined by Professor Victor Vaughan, who found that it contained pathogenic micro-organisms that caused the death of white rats. Dr. Baker advised the boiling of all water for cooking and drinking purposes, that the filter capacity of the works be increased three-fold, and that the reservoir for filtered water be cemented inside and outside, so as to be water-tight. The evidence is lacking in this case that the water supply was contaminated by the dejecta of typhoid fever patients, as occurred in the well known Plymouth epidemic; and it is possible that other factors caused the epidemic, as no information is given regarding the prevalence of the disease among those using the reservoir and those using well water.

Our Prize Essay.

By N. A. Vaughan, M. D., 704 Olive St., St. Louis.

Don't prescribe Godliver Glycerine because :

1st—It is so pleasant to the taste, that your patients may think they are not taking medicine ; and may even forget that you ever prescribed for them and fail to pay their bills. You should give them something nasty and they will never forget you.

2d—Its digestive powers so increase the appetite that they will soon be using pork and beans instead of your medicines. And the Butcher and Grocer will get the money which otherwise belongs to the Doctor and Undertaker.

3d—Its alterative properties infuses new blood and life and your patients take a bright view of the future and cease to be gloomy and sad. This you should prevent, for pain is a great educator.

4th.—Codliver Glycerine mixes uniformly in all prescriptions : which proves that it is best to use codliver oil, its emulsions, or some other indigestible stuff that will not mix, so that your patient will have two kinds of medicine to take, and will realize that life is not an empty dream, nor one continuous round of pleasure.

5th—Codliver Glycerine is borne by the most delicate children, increasing their digestive powers ; which shows it should not be used with them, because it costs money to raise children with strong digestive powers.

6th—Codliver Glycerine is valuable in the convalescent period from all diseases. Don't use it then for your patients may get too strong for other diseases to attack them, and thus cheat yourself out of continued fees.

7th—Codliver Glycerine is valuable in wasting diseases. You should be careful how you prescribe it or there may be a sharp advance in the "living skeleton" market.

8th—Codliver Glycerine is valuable in all lung and bronchial diseases. These cases will live a long time on nasty and indigestible stuff and if you cure them quickly on Codliver Glycerine for small fees, they may die of accident and you will loose big fees.

9th—Codliver Glycerine is valuable in Rickets and all strumous diseases of the bones ; but should not be used for you are liable to

cure so many children as to produce a scarcity of Dime Museum freaks.

10th—Codliver Glycerine exerts its effects on the system at once, while it takes the oil and emulsions from four to six weeks to produce any effect. You should let your patients suffer as long as possible and get a large fee, and if they should happen to get well they will think you are a stunner.—*Eureka Springs Med. Journal*

Menstruation in a Child Aged Six.

Jacobovitch (Nouv. Arch. d'Obstet. et de Gynec., Supplement, June, 1895,) related this case before the St. Petersburg Society for Diseases of Children. At the age of three she was brought to Jacobovitch for hemorrhages. The genitals were normal. A considerable amount of a milky fluid exuded from the breasts, which were of the size of hen's eggs. The child is now over six years of age. She menstruates several times yearly, especially in summer. The period lasts from three to four days. Before the catamenia the child becomes ill-tempered; afterwards she has headaches with vertigo. She is very anemic. The breasts are as large as small oranges; the labia minora and clitoris slightly hypertrophied.—*Boston Med and Surg. Journal*.

Sennine in Gynæcology.

The greatest difficulty heretofore experienced in the treatment of cervicitis, abrasions, fissure and ulcerations of the os uteri have been from the constant interference of acrid discharges that effectually prevented any healing process. The various washes and solutions, owing to these poisonous discharges, have been only of temporary service. Sennine, applied freely in its powder form, coagulates the oozing serum and thus hermetically seals the part until nature restores its integrity. The application may be preceded by a thorough syringing with one part of Sennine to fifty of water. This solution is also very efficient in leucorrhœa. If at the same time dessertspoonful doses of Dioiburnia be given internally three times daily, the cure is very rapid and permanent.

Ancient Fecundity.

Aristotle mentions a woman who had five living children at a birth four times successively. Menage tells of one who had twenty-one children in seven years.

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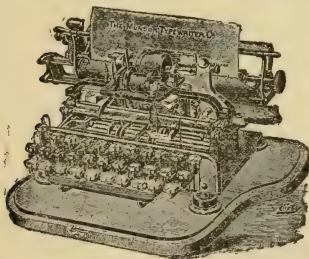
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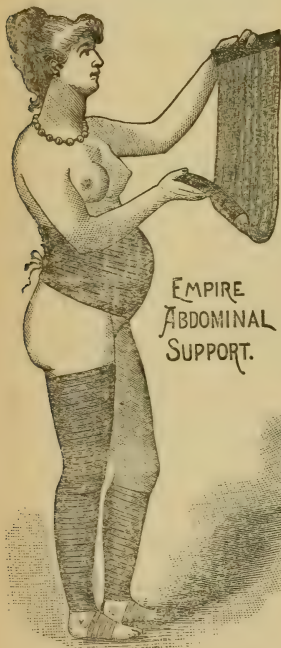
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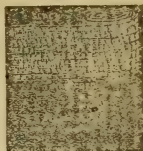
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The Doctor's Horse.

At a recent meeting of the West Somerset Branch of the British Medical Association, Mr. R. J. Collyns made what Americans call a "new departure" in selecting as the subject of his presidential address that useful and long-suffering *servus servorum Dei*, the doctor's horse (Brit. Med. Jour.) He discussed the animal's housing, bedding, food, work, and repose, with a thoroughly practical knowledge of his needs and a tender concern for his well-being and comfort, which Ouida and other "zoophilists" would do well to note. Mr. Collyns pleaded for the efficient ventilation and drainage of stables, and he pointed out that horses are much more likely to take harm from exposure after leaving a hot stable than a cool one. He considers peat-moss litter more economical than straw, but it has the disadvantage of softening the feet of some horses so much that they are more liable to be damaged by the roads. With regard to feeding, Mr. Collyns said the art of keeping a horse in condition is to maintain a just balance between food and work; and as horses, like their masters, differ in appetite and capacity for work, the owner must make it his business, as it is his interest, to become acquainted with their peculiarities of constitution. He strongly recommended maize, given in the proportion of one part to two or three of oats by weight; horse fed in this way are, he said, kept in harder condition and at less cost than when fed on grain consisting of oats alone. He further advised that some hay or chaff should be given with each feed of corn, as this makes the animal masticate the latter more thoroughly. He also insisted on the advantage of portioning out the food by weight rather than by measure. Mr. Collyns had also much to say about shoeing; his remarks on this subject were interesting, and his criticisms showed clearly that in order to shoe a horse properly a man should have some elementary idea of the structure of the animal's hoof. Had smiths any tincture of anatomy, they would not pare away the "bars," the two firm ridges which act as buttresses to prevent the "wall" of the hoof from being driven inward by the superincumbent weight, as many of them are doing now. Are there no courses of technical education for smiths? Goodsir, predecessor of the present distinguished incumbent of the chair of anatomy at Edinburgh, once said: "I love the horse; I have dissected him thrée

times." We do not know whether Mr. Collyns has shown his love in the same way, but he has evidently made careful study of the animal, his structure, his ways, and his wants, which has borne fruit in his excellent presidential address.

The Etiology of Malaria.

The latest edition to our knowledge of the bacteriology of malaria (Brit. Med. Jour.) has been contributed by Dr. Julius Mannaberg, in a paper read before the Society of Physicians at Vienna. He divides the micro-organisms connected with malaria into two groups: 1. Parasites with direct sporulation, without syzygies; 2. parasites with direct sporulation and with syzygies. In the first group he places the micro-organisms connected with the quartan and tertian varieties of the disease; in the second, the pigmented and unpigmented organisms found in the blood of patients suffering with quotidian ague, and also those described as occurring in the malignant forms of tertian ague. Dr. Mannaberg had observed the latter variety before Marchiafava and Bignami described them, and corroborates these observers in every detail, both as regards the appearance of the parasites and the nature of the disease produced by them. Dr. Mannaberg further demonstrated, by means of special illumination, that the younger forms of all organisms are not found in the corpuscles, as Marchiafava and Celli maintained, but, as Laveran had previously shown, are to be seen adhering to the outside of the red corpuscles. As regards the semilunar bodies in the blood of malarial patients, which have been described by several observers, Dr. Mannaberg states that in forty-three cases of "summer fever" (due to infection by the organisms contained in his second group) he found them thirty-seven times. He considers that these semiludes are formed by the coalition of two to four ameboid bodies, and states he has been frequently able to demonstrate the approach of such bodies to each other and the subsequent appearance of a semilune. Dr. Mannaberg opposed Laveran's views that the semilunar bodies were the result of the cachexia produced by malarial poison, for he had never seen them in the blood of patients suffering from the forms of disease produced by organisms of his first group when the ague had lasted for a very considerable period, but had frequently found them within the first few days of the fever in the blood of patients suffering from the more severe forms (se-

cond group) of malarial poisoning, but in which cachexia was not marked. Finally, he considers the treatment of malaria by quinine, and maintains that the organisms are destroyed and rendered inert by the action of this drug.

The Modern Treatment of Sprained Ankle.

BY W. K. GATEWOOD, M. D., OF WEST POINT, VA.

I was very much impressed by an article by Dr. V. P. Gibney, of New York, in the January number of the Polyclinic, on the treatment of sprained ankle.

On July 18th, 1893, I had a fine subject on which to try the plan described, and my success was magical and perfect.

A young lady with low quarter shoes jumped out of a buggy and sprained her left ankle very badly.

I saw her three hours after it happened, and her ankle and foot were dreadfully swollen, and very painful. I ordered the application of hot water and hot fomentations, which were kept up continuously. The pain, however, was so bad that I had to inject one-fourth grain morphia sulphate at bedtime. The fomentations were continued all next day (Saturday.)

Sunday, about noon, I visited her, and found her leg, ankle and foot very much reduced in size, but still so very painful that I determined to try my straps and bandages. Armed with a roll of rubber adhesive plaster one inch wide, I began to strap my patient's limb in the following manner: My first strip began at the inner side of the heel, crossed the foot obliquely, and ended under the foot at the base of the little toe. My next strip began at the outer side of the heel, crossed the foot and other strap, and ended at the base of the big toe under the foot. I then continued this strapping, overlapping about one-fourth inch each previous strap, until I had the whole foot, ankle and lower part of her leg completely enveloped. I then applied a cheese cloth bandage over the whole to make the plaster adhere more closely, and prevent the stocking from sticking to it. I then had her stocking and an old shoe put on and well laced up, and told her to get up and walk. There were half a dozen ladies in the room at the time, and I think they all thought I was crazy; for ten minutes before the foot could not be moved without my patient screaming. I insisted upon her getting up, and she did so. I told her to walk across the room and

back, which she did without even limping. I then told her to dress and go where she wanted to. On Tuesday she went home, the sprain giving her no more trouble. I told her to wear the straps for three weeks, and then remove two every day until all were off.

This treatment was so entirely successful and satisfactory that I hope all my brother doctors will try it, for I am sure they will be pleased with the result.—*Virginia Medical Monthly*.

Shorter Collegiate Education.

In an address before the Harvard Medical Alumni Association, by Prof. J. M. Da Costa, of Philadelphia, is an earnest plea for such a change in the course of instruction of literary colleges as shall enable young men to graduate at an earlier age than at present obtains. At the present time the average age is not far from 23 years, while it should not exceed 20. Prof. Da Costa says that an examination of the reports of the Universities of France and Germany show that the men who enter the profession with their academic course completed are, as a rule, 19 years of age.

Most of our literary colleges seem to hold the view that the college course is the end of mental training and culture, when, as a matter of fact, so far as those are concerned who enter the professions, it is simply the beginning, and it is not right to require young men to devote so many of the best years of life to mere preliminary training. A college course is merely a means to an end, and while the possession of a degree is desirable, it is by no means essential, and few young men will care to spend (we had almost said, waste) three years of life in securing it.

A New Medical School in Boston.

The trustees of Tufts College have decided to establish a medical department. The new school will be located in Boston, and will be opened next October, to men and women on the same footing. Albert Nott, M. D., is the Dean, and Charles P. Thayer, M. D., the Secretary.

Admission of Women to the British Medical Association.

In accordance with a resolution passed last year, the British Medical Association has amended its by-laws granting membership to women physicians, as they are called in England "*lady medicals*."

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Dr. Chas. Gatchell, of Chicago, in his "*Treatment of Cholera*," says: "As it is known that the cholera microbe does not flourish in acid solutions, it would be well to slightly acidulate the drinking water. This may be done by adding to each glass of water half a teaspoonful of Horsford's Acid Phosphate. This will not only render the water of an acid reaction, but also render boiled water more agreeable to the taste. It may be sweetened if desired. The Acid Phosphate, taken as recommended, will also tend to invigorate the system and correct debility, thus giving increased power of resistance to disease. It is the acid of the system, a product of the gastric functions, and hence, will not create that disturbance liable to follow the use of mineral acids."

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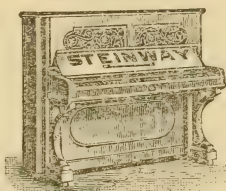
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Fig. 1.

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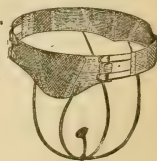


Fig. 4.

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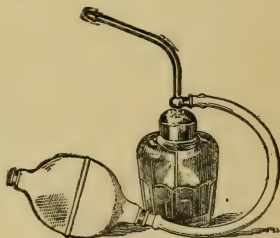
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Esencia de Calisaya.

Since this preparation was first put upon the market by the Mosquera-Julia Food Co., of Detroit, Mich., it has grown rapidly in favor as a tonic, stomachic, and to a lesser extent as an anti-periodic. There are few cases in the convalescent stage to which it is not applicable, especially if anorexia, weakness, and physical and mental depression are to be overcome.

It is a well known fact, moreover, that the combined alkaloids of the cinchona bark are much more effective as a tonic than any one of the same taken singly. They are to be preferred in many instances as an anti-periodic, particularly where the periodicity of the attack has been in some degree mitigated. It is for this reason that the East India Government now provides its officials with what is termed "Cinchona Febrifuge"—which is but a combination of cinchona alkaloids—in preference to quinine. While cases are encountered where quinine seems practically indispensable, there are few that will not yield, and more satisfactorily, to a combination of cinchona alkaloids if persisted in. Esencia de Calisaya and Cinchona Febrifuge are practically identical, save that the former is a fluid medicament, the latter a powder.

It is for the foregoing reasons and to meet the demand of a large class of medical men, that Esencia de Calisaya has been put upon the market; recently, too, its scope has been increased somewhat, in that it is employed and highly recommended as a tonic in neurasthenia and other forms of disease that are the result of, or connected with, general physical and mental depression. Apropos of this, Dr. Wyatt Wingrave, Surgeon at the London Throat and Ear Hospital, remarks :

"I have great pleasure in expressing my appreciation of Esencia de Calisaya. It is an ideal 'Pick-me-up' and general tonic. It is slightly stimulant to the gastric mucous membrane, and is particularly useful in atonic dyspepsia. In the alcohol habit, it satisfactorily neutralizes the craving for spirits, and will be found of great service in treating this distressing disease."

Other physicians have expressed themselves in like manner, asserting Esencia de Calisaya as a valuable adjunct in the treatment of the liquor habit. It is objected by some that the preparation is too sweet, while others assert the precise contrary. Such a

fault, if fault it be, is individual, and consequently cannot be corrected in the process of manufacture where a medicament is applicable to so large a class of diseases, and to so extensive a *clientele* as is thus provided.

No Mistake in the Pulse.

Dr. B—, of Virginia, is a very able man in two branches of human endeavor. He is famed as a physician, and as a consumer of wines at dinner he is probably not anywhere excelled. Because of the latter distinction he is rarely called upon professionally after dinner by those who know him. It happened not long ago, however, that the sudden illness of the wife of one of his friends made it necessary that he should be summoned in a professional capacity late in the evening. The doctor came, visited the patient, and prescribed.

As he was about to leave the house the sick woman's husband asked what the exact trouble was. The doctor put on a long face, and seemed unwilling to gratify the husband's curiosity; but finally, after much insistence upon the latter's part, he observed, gravely, that the lady had been indulging in too much strong drink, but that he had prescribed, and that the ill effect would soon pass away.

The revelation astounded the husband, and he expressed some doubt as to the accuracy of Dr. B—'s diagnosis.

"I am not mistaken at all," he replied indignantly. "I have had much experience in cases of this sort, and cannot be mistaken. The pulse is an absolutely accurate indicator. Mrs. S—'s pulse at this moment is the pulse of the inebriate." With this he left the house, not at all pleased that Mr. S— should have chosen to doubt his judgment.

Mr. S— immediately repaired to the sick room, and was still further disturbed on entering to find his wife in a most hilarious state of mind, laughing so heartily, in fact, that he was almost of the opinion that Dr. B— was right after all. Upon inquiring of madam as to the cause of her mirth, he was informed that Dr. B— had sat at her bedside, looked at her tongue, and requested to feel her pulse. She had held out her hand, but the doctor had not taken it at all, but had contented himself with placing the fingers of his right hand upon his own left wrist. In short, the doctor had felt his own pulse.—*Harper's New Monthly Mag.*

The Sterilization of Milk.

At the present day, from the experiments of many observers, when sterilized milk, which has been subjected to 212° F. (100° C), has been given to infants they have not thrived. The milk thus treated seems to have been devitalized, as it were, and, while we have obtained immunity from pathogenic germs by such a process of sterilization, on the whole we have not seemed by the old process to have reached the goal anticipated in the feeding of infants.

Last June, Dr. R. G. Freeman published in the New York Medical Record an article on the "Pasteurization of Milk," or the sterilization of milk at 167° F. (75° C) followed by rapid cooling. In this article he comes to similar conclusions as other observers, notably, Dr. Rotch, of Boston, and Dr. Koplik, of New York.

In this method of treating milk by a lower temperature, followed by rapid cooling, one finds the children thrive much better on sterilized milk, while the deleterious influence of any bacteria which may have been contained in it has been rendered *nil*.

Germes of tuberculosis are destroyed at a temperature of 167° F continued for fifteen or twenty minutes, as well as the germes of the infectious diseases, including cholera. Moreover, there is less tendency to the formation of large curds in the infant's stomach when the cow's milk has been subjected to the lower temperature rather than the higher.

The value of the Pasteurization of milk in milk laboratories as suggested and practised by Dr. T. M. Rotch, of Boston, and exhibited by him in the Harvard College exhibit of the Worlds Fair, at Chicago, is inestimable. His plan is to provide milk sterilized and treated according to the specific prescription of the attending family physician. This can be done in any large city, and bottles of sterilized milk thus treated can be expressed over the immediate country with almost warranted success in its effects.

We agree in every particular that relates to the supervision of milk delivered in large cities by the appointing of milk inspectors. There is not enough care taken in the delivery of milk, especially to the poorer classes. The standard in quality should be kept at a high rank and the prevention of milk being sold from tuberculous cows maintained, all of which requires an efficient officer whose duty is to the public health rather than of political character.—*Times & Register*.

Temporary Removal of the Kidney from the Abdominal Cavity.

BY FRANCIS L. HAYNES, M. D.

I have twice removed the kidney from the abdominal cavity, and after a thorough examination returned it. I am, I believe, the originator of this procedure.

The following was the technique observed: A T-shaped incision was made in the lumbo abdominal region; the kidney was enucleated from its fatty capsule, the lower extremity of the kidney slowly brought out of the incision and finally the whole organ, the whole process bearing a great resemblance to the delivery of the fetal head. Next the kidney was incised, a finger introduced into the pelvis and the whole organ explored bimanually. All indurated spots were freely incised and explored. Hemorrhage was at once checked by a matraass, suture of catgut introduced by a round needle, and when necessary passing through the entire kidney, and the organ returned. In one case traction produced a slight laceration near the pelvis, from which free hemorrhage occurred, readily checked, however, by a square suture. In one case a stone was found in the pelvis of the kidney and removed by a direct incision. In the other case, after a prolonged search, nothing was found except great enlargement (large gouty kidney). Both cases recovered.

A Suicidal Epidemic.

An unusually large number of suicides has been reported this summer, both in this country and in Europe. London, Paris and Hungary are especially afflicted. Many of the cases have had no discoverable reasons for their occurrence. The usual conditions of long continued, dark, wet weather said to cause an increase of suicides have certainly not been present this year.

Their New Joke.

A physician in Illinois had a well dug. When it was about completed, he went down into it to inspect the work, and the walls collapsed and buried him. But it served him right, for he ought to have been attending to the sick and let the well alone.—*Primrose Minstrels*—*Nat'l Pop. Review*.

Highland Water

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Is the Best Tonic, Diuretic, Eliminative and Solvent of Uric Acid.

1. Because it is the softest and purest water known, containing no excess of mineral salts and no lime or organic impurities, being therefore non-irritating to the digestive organs and kidneys.

Dr. G. THIN (British Medical Journal, vol. ii, 1891, page 91) states that the consumption of water containing lime brings about the development of gouty conditions; no doubt it acts in the same way as the contamination of the water by lead.

2. Because it contains Iron in combination with the alkalies, Sodium and Potassium in small quantities, as recommended by Profs. Flint, Thomson, Draper and others.
3. Because it comes from a region free from malarial germs.
4. Because all its mineral salts, and five of them in the exact form given in its analysis, are found in the human blood, of which they form a most essential part.

Analysis.—Each gallon contains :

Carbonate of Iron.....	1,100	grs.
Oxide of Iron.....	0,310	"
Chloride of Sodium.....	1,000	"
Sulphate of Soda and Potash.....	0,310	"
Carbonate of Soda and Potash.....	0,831	"
Carbonate of Magnesia.....	1,230	"

4,781 "

HIGHLAND WATER is sold in glass only, and every bottle has our registered trade mark (two crossed arrows) on both cork and label. It may be obtained from Grocers and Druggists generally, or from the

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—ANADOL—

(Antipyretic and Analgesic) is useful in Neuralgia, Typhoid Fever, La Grippe, Sciatica, Acute Rheumatism, Hemiplegia and allied affections. It reduces Temperature and relieves pain, without subsequent ill effects. Price per ounce, 25 cts.; per 100 tablets (5 gr.) 50 cts. Samples of above sent on application to

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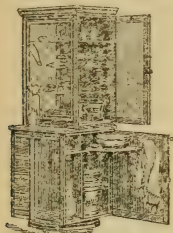
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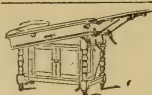


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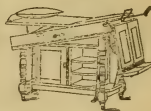
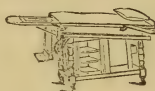
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Everything in Clothing, Hats and Furnishings,

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Losophan.

Dr. J. V. Shoemaker says Losophan is the name of a compound the activity of which depends upon the Iodine entering into its composition. Losophan contains 80 per cent. of Iodine, and presents itself in the form of white needles which melt at 250.7° F. It is insoluble in water, slightly soluble in Alcohol, but dissolves readily in ether, chloroform, Benzol, and, at a temperature above 140° F., in fixed oils. Losophan is an irritant substance, and its action needs, therefore, to be closely watched. For this reason, moreover, it is not adapted to the treatment of acute diseases of the skin. In a number of chronic affections, however, its use has been followed by excellent results. In old cases of eczema, attended with considerable thickening of the integument and distressing itching, Losophan has proved of service. It stimulates the absorbent vessels to remove the infiltrate and at the same time it relieves the itching. The latter symptoms is, in other diseases, also allayed by the application of the same remedy. It may be employed, therefore, in cases of paræsthesia, prurigo, urticaria, etc.

Losophan is of value in the squamous form of eczema, where the skin is red, dry, infiltrated, and scaly. Fissured eczema, a rebellious and painful form of the disease, is benefitted by the application of Losophan. The congestion and thickening of the surface are gradually lessened and the cracks begin to heal. In the later period of sycosis, when the papules and pustules are numerous and may have coalesced into a mass, when the skin is swollen and thickened, Losophan may be used with success. The subjective symptoms are ameliorated, inflammatory congestion subsides, and the infiltration is removed. The chronic forms of acne, especially the pustular and indurated, may be cured, in process of time, by the persevering use of Losophan. The same remark is true of the second stage of rosacea. The irritant properties of Losophan render it of avail in certain parasitic affections. It has, in some cases, proved curative in pediculosis and scabies, but has been more generally successful in the treatment of the various forms of tinea, trichophytina or ringworm. Losophan has been used in the form of a lotion, or an ointment. Dr. Edmund Saalfeld, of Berlin, to whom we owe the first clinical investigations of this substance found as the results of his experiments, that the most generally suitable

lotion consists of 11 per cent. solution of Losophan in 3 parts of Alcohol with 1 part of water. As an ointment it may be employed in the strength of 1 to 3 per cent.—*Medical Bulletin, Sept., 1893.*

Physicians in Japan.

An ex-attache writes: "Perhaps the most charming manner of compensating physicians for their care and attention is that which is customary among the natives of Japan. Physicians do not charge for their services, but on the contrary decline to name an amount, and protest against any idea of remuneration. Patients on their side are too proud to accept such services free, and send to the physician, not as a fee but more as a friendly gift or token of gratitude, a sum of money proportionate to the means of the giver, with some piece of silk, bronze, or lacquer work—the idea being that medical attention is by far of too important and elevated a character to be desecrated by barter for filthy lucre."

What a pity that our boasted Western civilization, with all its commonplace vulgarity and lack of delicacy, will not admit of adoption of such a charming method of intercourse between the medical man and his patients!

Another Broken Neck.

A third case within three months of a patient living with a fracture of the cervical vertebræ has been reported. The patient is under treatment at the Manhattan hospital, and more than a week has elapsed since he broke his neck in a fall of ten feet. The other two patients, whose cases have already been referred to in the Journal are still both alive, and one of them has already been discharged from hospital, although still wearing an apparatus to relieve the injured vertebræ of the weight of the head.—*Boston Medical and Surgical Journal.*

The Maryland Medical Journal.

Dr. A. K. Bond has resigned the editorship, owing to the demands of his private interests. His connection with that journal, dating from May, 1891, has been marked by ability, dignity, and a progressive spirit. The name of his successor has not been announced.

Vin Mariani.

The virtues of erythroxylon coca as a general tonic and nerve stimulant render it a valuable remedy when given intelligently in proper doses and at the proper time. In cases of debility, tardy convalescence from an exhausting illness, chronic indigestion, etc., an alcoholic preparation effects an excellent purpose. The admirable preparation known as Vin Mariani fulfills every indication in the conditions enumerated. Being made with a good sound wine, it is palatable and readily taken. In addition to other uses the writer has found it very advantageous to mothers or wives who are subjected to unusual strain of body and mind, together with loss of sleep, when nursing a member of the family in some prolonged or alarming illness. Mariani's wine of coca is very useful in preventing or alleviating hoarseness in public speakers or singers and it strengthens the vocal cords.

Hypertrophic Nasal Catarrh.

Dr. Edward Walsh, of Denver, Col., says: "The following will be found a very efficient formula for the purpose of cleansing the nostrils:

R Sodii Bicarbon.,
 Sodii Boratisaa ʒss
 Listerine ʒj
 Aquæ..... ʒiij

With a nasal spray the chambers can be thoroughly irrigated. All excessive secretions being removed, we come to the treatment proper."

Congenital Absence of Nails.

Dr. Herman Eichhorst reports in the Centralblatt f. Klinische Medicine of April 8, 1893, the case of a man, twenty-six years of age, who had no nails on either fingers or toes. The nail-bed and fold were well formed, and the former presented a shiny surface, giving the appearance of a very thin nail. Close examination showed, however, that there was not the slightest trace of a nail, the skin of this part being softer and more delicate even than the surrounding integument. Sensation was also as acute here as on the palmar surface of the fingers. The man's hair and teeth were perfectly normal.

The Value of Ponca Compound.

More and more, as time passes and the smoke of discussion gives way to solid conviction, is the profession impressed with the thought that there are many of the diseases of women and girls, which, under no circumstances, require or should receive manipulative or mechanical treatment. Indeed, conscientious physicians, recognizing the neurotic factor, grant to the uterus and its appendages the privilege to receive gratefully and enthusiastically such a remedy as ponca compound. It serves as a general stimulator of secretions, and as a tonic in general. The indorsement of such men as Dr. B. M. Owen, of Evansville, Ind.; Dr. Thomas Hunt Stuckey, of Louisville; Dr. Arch Dixon, President of the Kentucky State Medical Society; Dr. Wm. F. Kier, of St. Louis, and hundreds of others scattered over the country, is convincing proof of the value of ponca compound.—*Med. Mirror*.

Antiseptic Varnish.

Dr. Berlioz gives the composition of this varnish, which will be found useful on mucous membranes and where it is difficult to keep any other dressing on. He calls it *steresol*.

R	Gum lac, purified and soluble in alcohol.....	270 grms.
	Benzoin the same.....	10 grms.
	Balsam of Tolu.....	10 grms.
	Carbolic Acid, crystalized.....	100 grms.
	Oil of Cinnamon.....	6 grms.
	Saccharin.....	6 grms.

Then add Alcohol to make a quart.

The Medical Journal Publishers' Association perfected its organization at Washington, D. C., September 8th, and decided to hold the next meeting in Cincinnati in December. The following officers were elected: President, Dr. Landon B. Edwards, Virginia Medical Monthly; Vice-President, Dr. J. C. Culbertson, Cincinnati Lancet-Clinic; Secretary, Dr. F. King, Polyclinic; President, Dr. J. Macdonald, Jr., International Journal of Surgery; Executive Committee, Drs. Stowell, Le Grand, Fairchild, Fassett and Chambers.

When a doctor starts about seeing whether a modern prize-fighter is in condition one of the first things he does is to bid him let him see his tongue.—*Philadelphia Times*.

VAGINAL

EUCORRHŒA

AND ALL

VAGINAL DISCHARGES

Ex. Helonias	½ gr.
Acid Tannic	2 gr.
Acid Salicylic.....	1 gr.
Ex. Opium.....	¼ gr.
Acid Boracic	3 gr.
Ex. Hyoscyamus	1 gr.
With Thymol, Eucalyptol and Alum.	

DIRECTIONS—One or two to be inserted into the Vagina each night, followed by a warm water douche in the morning.

Put up in Elegant Shape for Physicians' Prescriptions only.

FIFTY IN EACH BOTTLE; PRICE, \$1.00.

GENTLEMEN—I have practiced medicine quite a number of years, but I have never used a remedy that acted with such marvelous effects for good as your "HELONIA TABLETS." Leucorrhœa vanishes like magic. I am Yours truly,

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I have no hesitation in recommending the Tablets to the profession. They are easily handled, elegantly prepared, and will rapidly take an important place in gynecological therapeutics.

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My experience has been so highly satisfactory that these tablets form a part of my daily armamentarium and I would not be without them at any cost.

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The Demand For

a pleasant and effective liquid laxative has long existed—a laxative that would be entirely safe for physicians to prescribe for patients of all ages—even the very young, the very old, the pregnant woman, and the invalid—such a laxative as the physician could sanction for family use because its constituents were known to the profession and the remedy itself had been proven to be prompt and reliable in its action, as well as pleasant to administer and never followed by the slightest debilitation. After a careful study of the means to be employed to produce such

A Perfect Laxative

the California Fig Syrup Company manufactured, from the juice of True Alexandria Senna and an excellent combination of car-

minative aromatics with pure white sugar, the laxative which is now so well and favorably known under the trade name of "Syrup of Figs." With the exceptional facilities, resulting from long experience and entire devotion to the one purpose of making our product unequalled, this demand for the perfect laxative

is met by Our Method

of extracting the laxative properties of Senna without retaining the griping principle found in all other preparations or combinations of this drug. This method is known only to us, and all efforts to produce cheap imitations or substitutes may result in injury to a physician's reputation, and will give dissatisfaction to the patient; hence, we trust that when physicians recommend or prescribe "Syrup of Figs" (Syr. Fici Cal.) they will not permit any substitution. The name "Syrup of Figs" was given to this laxative, not because in the process

of Manufacturing

a few figs are used, but to distinguish it from all other laxatives, and the United States Courts have decided that we have the exclusive right to apply this name to a laxative medicine. The dose of

"SYRUP OF FIGS"

as a laxative is one or two teaspoonfuls given preferably before breakfast or at bed time. From one-half to one tablespoonful acts as a purgative, and may be repeated in six hours if necessary.

"Syrup of Figs" is never sold in bulk. It is put up in two sizes to retail at fifty cents and \$1.00 per bottle, and the name "Syrup of Figs" as well as the name of the California Fig Syrup Company is printed on the wrappers and labels of every bottle.

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The Treatment of Scrofulous Glands.

Amongst the remedies employed for this purpose, the physician who has had any experience with the Elixir Six Iodides (W. G.'s), accepts the fact that it is the most effective combination he possesses.

Convulsions in Children always create great excitement and alarm to the parents and friends. It is due to the irritability of the nervous system, and may be of serious moment, or it may be trifling in its nature, owing to the cause which has produced it. It is therefore important to ascertain the source of the convulsions in order to give a correct prognosis and to know what to prescribe to relieve the little sufferer. It may indicate serious cerebral disease, or it may be owing to reflex origin. When the convulsions are confined to one side of the body, or to one limb, or followed by squint or ptosis, or by stupor, or one pupil is larger than the other, we may fear some brain lesion. Exanthemata and other febrile disorders are sometimes attended with convulsions. If there is no serious brain lesion it is important to distinguish whether the attack is epileptic or eclamptic. High fever don't attend epilepsy, so if there is fever the convulsions are probably reflex. It is characteristic of epileptic seizures that they rarely last longer than from ten to fifteen minutes. Examine the urine for albumen, as children are occasionally seized with uræmic convulsions. Eclamptic seizures are rare in children after four years of age. Reflex convulsions have very favorable prognosis. At any time we are hastily summoned to attend a child in convulsions, place the little patient for about fifteen minutes in a warm bath at a temperature of 85 or 90 degrees, and apply cold water to the head. Administer about two grains of chloral dissolved in about one-third teaspoonful of the Elixir Six Bromides, but if the little sufferer is unable to swallow, give twice as much by the rectum, which can be safely repeated every few hours if required. Improve the general health, regulate the alimentary canal and remove all sources of irritation. When once the convulsions are in abeyance, we have found no remedy so powerful and so safe in preventing a return of the convulsions than the Elixir Six Bromides (W-G's) given alone, and owing to its purity it is well borne by young children. Give it in sufficient quantities till the physiological effect of the Bromide is produced.

A New One.

Last year much joy was given to the Persians by a man with a musical anus. This year medicine supplies the curiosity. At the close of the Congress for the advancement of Science the members of the Section of Medicine had a banquet. At desert the "venerable Dr. Schiff, of Geneva, who presided," entertained the company by playing the "Marseillaise" with the abductor muscles of his feet. Strong rhythmic contractions produced a sound audible for two or three metres. He is said to be the only possessor of this accomplishment in society, which, however, does not prevent him from being a gallant gentleman and a scholar.—*Au contraire!*—*Cor. Boston Med. and Surg. Journal.*

Marital Reciprocity Amongst Doctors.

We seldom hear of doctors marrying one another; but that has happened recently in St. Louis. Dr. L. M. Perkins and Dr. M. H. Fletcher, both assistants of Dr. Tuholske, united themselves in the bonds of matrimony early in September.

The American Association of Obstetricians and Gynecologists, at its annual meeting, elected the following officers: President, Dr. Geo. H. Rhoe, of Catonsville, Md.; Vice-Presidents, Drs. W. P. Manton, of Detroit, Mich., and George F. Hulbert, of St. Louis, Mo.; Secretary, Dr. Wm. Warren Potter, of Buffalo, N. Y.; Treasurer, Dr. X. O. Werder, of Pittsburg, Pa.; Executive Council, Dr. Charles A. L. Reed, of Cincinnati, Ohio, Dr. John G. Sexton, of Kushville, Ind., Dr. James F. Ross, of Toronto, Ont., Dr. Wm. W. Seymour, of Troy, N. Y., and Dr. D. Hughes, of Philadelphia, Pa.

For Chlorosis.

R Feri ex Quinn & Amon. Cit ʒ ss.
 Dioiburnia. ʒ viij.
 M. Sig. Teaspoonful three to four times a day.

We call the attention of our readers to the advertisement of the Robinson-Pettet Co., Louisville, Ky., which will be found on another page of this issue. This house was established fifty years ago, and enjoys a widespread reputation as manufacturers of high character. We do not hesitate to endorse their preparations as being all they claim for them.

Swallowing a Thermometer.

M. Toubin communicated a curious case of a man swallowing a thermometer. A prisoner attempted suicide by swallowing the handle of an iron spoon. Nothing was done for him, as he did not seem to be much affected by the foreign body, save the administration of a good deal of soft food. His case, however, was closely watched and the temperature taken daily. About ten days after his first exploit the fellow swallowed the thermometer. Nine days subsequently he expelled *via naturales* both the spoon-handle and the thermometer.—*Medical Press*.

Mexico Takes the Pan.

The next meeting of the Pan-American Medical Congress will be held in the City of Mexico. The date will be determined by the international executive committee which comprises one member from each of the Pan-American countries. It is probable that the congress will convene five years hence, and the winter season will be selected for the occasion. Professor Rafael LaVista, of the University of Mexico, has been elected president.

Prolonged Delivery.

Touvenaint (Centralblatt für Gyn., 1893, No. 22,) reports the case of an embryotomy done after version, in which parts of the fetus were removed during three days, the head being left in the uterus. After the patient had resumed her occupation, a discharge persisted, and upon consulting another physician it was found that a utero vesical fistula existed. It was also found that the skeleton of the entire fetal head still remained in the uterus. After much difficulty dilatation was completed by the use of laminaria, and the foetal bones extracted with forceps. The woman finally recovered.—*Am. Jour. Med. Sciences*.

There died lately in Kankakee insane hospital, after a brief residence, a senile lunatic whose sphincter ani had been stretched, causing fæcal incontinence, whose (anal) "pockets" had been "cut out" and whose clitoris had been excised. Soon after recovery from these "operations" (done for the "cure" of senile dementia) she passed into a furibund senile state which caused death. This certainly was a triumph of "orificial surgery" in psychiatry.

Should Doctors Charge Dentists ?

The above question is going the rounds of the papers. It seems to be fair that dentists should be remunerated for out-of-pocket expenses, such as gold-filling; and *vice versa*, that dentists should pay medical men expenses incurred for drugs or surgical instruments, supposing these to be supplied. An arrangement is sometimes made between doctor and dentist for mutual attendance at half fees.—*The Med. Press*.

"A Good Location."

Under this caption the Texas Sanitarian informs its readers of an opening "for a competent physician desirous of a practice worth \$1,000 or \$1,200 a year in a *most healthful town* in Southwestern Texas!"

It strikes us the average medical man is not looking for that kind of town.

Hereafter physicians in New York attached to any hospital can give their testimony before a referee, instead of being compelled to waste their time attending court, in the case of patients in the institution with which they are connected. It strikes us that this ruling is in the interest of justice and medical men.

"What a pretty dimple that boy has," said a lady while visiting a doctor's family, as she patted the hopeful on the head. To which the infant replied: "You think that is a pretty dimple? Well, you ought to see the one on my stomnick."—*N. Y. Med. Times*.

There are powders and powders, but in point of quality—which, after all, is the one and only desirable feature—Julius Fehr's Talcum leads them all. We give the above recommendation after extended and diversified use, and feel the facts fully warrant the strength of our testimonial.

Workman—I must go to the dentist and have my wisdom tooth pulled.

Employer—I won't allow it! You are stupid enough already. You had your wisdom tooth when I hired you, and you must keep it.—*Fliegende Blätter*.

INFORMATION FOR NURSES,

IN HOME and HOSPITAL,

By MARTIN W. CURRAN, Graduate of the Mills Training School,
Bellevue Hospital, New York City.

This book is prepared primarily for a text book in training schools for nurses, but it is a book that every physician that examines will be glad to recommend, not only to young people wishing to fit themselves for the nurses profession, but also to mothers of families who are anxious to read something on the treatment of diseases and are too often misled by the numerous books of quack remedies. "INFORMATION FOR NURSES" is thoroughly scientific, and the author wisely limits himself to instructing his readers how to follow a doctor's directions intelligently, instead of indulging in the dangerous pastime of administering drugs on their own responsibility.

The retail price of this book is \$1.75, but as we expect to introduce it largely through the recommendation of physicians, we will send a copy prepaid to any physician's address on receipt of \$1, and shall be glad to arrange with him for placing the sale in his vicinity in the hands of any agent whom he may designate.

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500 of our TABLES are in the hands of the best class of professional workers in the United States. DR. JAMES T. POTTER, 1006 Bainbridge Street, Philadelphia, writes us Sept. 30, just passed: "I am very much pleased with your Table in every particular. It answers the purpose better than any chair I have yet seen." We receive such communications every day. Terms CASH. Price \$15, well wrapped and on cars at factory, and if the Table don't suit you, send it back and we will return your money. Address

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And to be a hand-made Sour-Mash of the finest quality For sale in cases containing 12 bottles, 15 years old. Price \$15 per case; or by the barrel, 1 to 15 years old. Samples sent on application. No family should be without this Whiskey in case of sickness. References, any bank in Louisville. Address:

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DOCTOR:

Have you tried our

Acetaniled and Caffine Compound?

Hundreds of others have and they pronounce it the BEST Analgesic and Antipyretic to be obtained.

Does not depress the heart, useful in ALL cases where a pain reliever and calmative to the nervous system are indicated.

Four ounces powder or 5 gr. tablets, mailed for \$1.00.

(One-fourth price of Antikamnia.)

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In Writing to Advertisers, Mention This Journal.

Meat Eating and Bad Temper.

One deplorable result of excessive meat eating in England is the ill-temper which is a chronic complaint among us. "In no country," declares Mrs. Ernest Hart in the Hospital, "is home rendered so unhappy and life made so miserable by the ill-temper of those who are obliged to live together as in England. If we compare domestic life and manners in England with those of other countries where meat does not form such an integral article of diet, a notable improvement will be remarked. In less meat eating France urbanity is the rule of the home, in fish and rice eating Japan harsh words are unknown, and an exquisite politeness to one another prevails even among the children who play together in the streets. In Japan I never heard rude angry words spoken by any but Englishmen. I am strongly of the opinion that the ill temper of the English is caused in a great measure by a too abundant meat dietary combined with a sedentary life. The half oxidized products of albumen circulation in the blood produce both mental and moral disturbances. Brain workers should live sparingly if they would work well and live long. Their force is required for mental exertion, and should not be expended on the task of digestion for they should remember that the digestion of heavy meals involves a great expenditure of the nerve force. The healthful thing to do is to lead an active and unselfish life, on a moderate diet, sufficient to maintain strength and not to increase weight.—*British Medical Journal*.

Dr. Thomas More Madden, one of the foremost gynæcologists of Europe, has prepared a text-book on Diseases Peculiar to Women, which will be published at once by the J. B. Lippincott Company. The work is more than usually important, from the fact that it contains the results of the author's wide experience and is embellished with numerous excellent sketches of cases under clinical observation made by the most eminent physicians in England and America.

Dr. H. T. O'Farrell of Highland, North Carolina, says: "Permit me to state that I have thoroughly tested your Antikamnia in a great variety of cases, and find it entirely reliable and eminently satisfactory. It has nearly displaced the use of morphia with me."

More Newspaper Medicine.

One of the New York newspapers lately gave prominence to a most imaginative article on disease of the vermiform appendix. The writer took the position that operations for that disease were done with unnecessary frequency, and cited a case in which an individual affected with it had declined surgical interference and had ultimately *coughed up* his appendix.

The Richmond Academy of Medicine and Surgery.

The special order for the meeting, on Tuesday evening, the 24th, was a discussion on Cerebro-spinal Meningitis. The discussion was opened by Dr. Landon B. Edwards.

For Headache.

R Antipyrine..... ʒj.
 Neurosine..... ʒij.
 M. Sig. Dessertspoonful as indicated.

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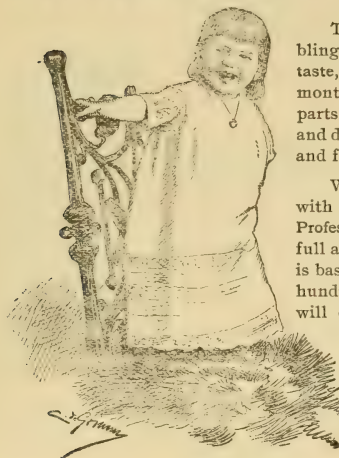
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Wheeler's Compound Elixir of Phosphates and Calisaya. A nerve food and nutritive tonic for the treatment of Consumption, Bronchitis, Scrofula and all forms of Nervous Debility. This elegant preparation combines in an agreeable Aromatic Cordial, acceptable to the most irritable conditions of the stomach: Say Bone Lime Phosphate, Soda Phosphate, Iron Phosphate, Phosphoric Acid, and the active Principles of Calisaya and Wild Cherry.

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Hypophosphite Iron 2 grains, Hypophosphite Lime 2 grains, Hypophosphite Manganese 1 grain, Hypophosphite Potassium 2 grains, Hypophosphite of Quinine 1 grain, Hypophosphite Strychnine 1-16 grain.

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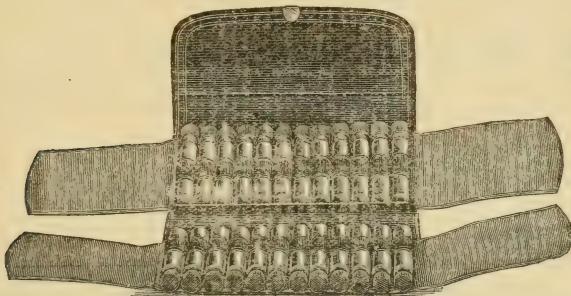
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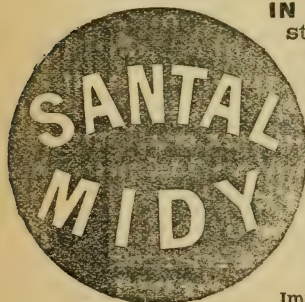
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Charlotte Medical Journal.

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No. 6.

Original Communications.

Use and Abuse of the Obstetric Forceps.

BY WM. T. WOODLEY, M. D.

Paper Read before the Guilford County (N. C.) Medical Society, Oct. 2, 1893.

Mr. President and Gentlemen of the Medical Society of the County of Guilford :

It is with trepidation that I read you this short paper on the Use and Abuse of the Obstetric Forceps, because the idea here set forth is an innovation upon what is taught by the majority of teachers and writers, but is in perfect accord with one of the leading institutions in America's Metropolis—the medical centre of this country—and from which I have recently received instruction. You are aware under what conditions the forceps should be used, viz. : On the part of the mother, threatened asphyxia from cardiac or pulmonary disease, uterine inertia, rupture of the uterus, eclampsia, excessive anæmia, or from any cause producing unusual delay. On the part of the fœtus, sudden death of the mother, prolapse of the cord, and feeble cardiac pulsations.

There are two methods of applying the forceps, viz. : the unscientific pelvic and the scientific cephalic.

It is true that there can be but one method when the head is above the brim, or what is known as the high forceps operation; in this case the pelvic is the only method, because there is no chance of rotating the blades above the pubes. In the pelvic method of the low forceps operation, the operator simply puts the left blade in the left side, and the right blade in the right side of the pelvis, and trusts to luck in getting the blades properly adjusted to the fœtal head; and if Mohammed cannot go to the mountain, the mountain must come to Mohammed, or at least it would seem so in this instance, for if the forceps are not properly adjusted, the operator

waits for a uterine contraction to rotate the head into the blades. When the head is irregularly grasped, the blades stand widely apart and the handles cannot be approximated. If the occipito-frontal diameter, instead of the biparietal lies in the transverse diameter of the blades, there is great risk of materially damaging the foetus by compression. It is claimed by a recent writer on this method that there is great difficulty in approximating the handles, even insuperable, in case of a very large head. In the l. o. p. or r. o. p. position, the forceps, in the effort made to lock, rotates the occiput into the hollow of the sacrum, which is the reverse of the position desired by the operator. In a great many forceps cases, the head after descent fails to rotate, the sagittal suture is found in the transverse diameter of the pelvis; now apply the forceps by the pelvic method, and what is the result? The head is grasped by the blades in the occipito-frontal diameter—an application that is undesirable, unless it be for flexion. If the blades lock readily, the operator may have reason to believe that he is in luck, and that they are properly adjusted. This method of application is unscientific, to say the least of it.

The cephalic method and preparation of patient for same, is as follows, viz: The vagina is thoroughly irrigated with a warm 1-5000 bichloride solution; the irrigation is done with a fountain syringe and a zinc douche pan. The hips of the patient are placed at the edge of the bed and her legs are held by assistants. Chloroform is given her to the obstetric degree; the forceps is sterilized by steaming, then is placed in a pitcher of carbolized warm water; the left blade is taken in the left hand, the thumb resting upon the inside of the handle, and the knob on the anterior and lower portion of the handle between the index and medius. The blade is annointed with carbolized vaseline; the index and medius of the right hand are then introduced into the vagina posteriorly as a guide for the blade, which is held nearly perpendicular, and after the point has entered the vulvar orifice, the handle is gently depressed—its own weight being nearly sufficient—the point of the blade is passed along the perineo-sacral gutter to the promontory of the sacrum, when it is deflected to the left so as to rest upon the sacro-iliac symphysis, the shank resting upon the fourchette. The right blade is now taken in the right hand, annointed with carbolized vaseline, and introduced by passing it along the

left blade, so as to conform to its curvature, to the promontory of the sacrum, when it is deflected to the right so as to rest upon the sacro-iliac symphysis, the shank lying immediately alongside of the shank of the left blade. The forceps are now ready to be applied by rotation to any position of the vertex presentation. If the position is l. o. a., the left blade is in position, and the right blade must be rotated by pressing the convex side of the blade against the right wall of the pelvis, keeping the shanks close together, but depressing the handle so that the blade will in rotating conform to the pelvis; as soon as the concavity of the forceps look upward and to the left, lock and make traction, but no rotation, the head impinging upon the anterior decline plane will rotate naturally after traction is made. In the r. o. a. position the right blade is in position and the left blade is rotated. For the l. o. p. position there are two applications, the single and the double; in the single application the right blade is rotated so that when locked the concavity of the forceps look downward and to the left. In the double application the left blade is rotated over the occiput and locked, and without making traction the head is rotated to the l. o. a. position and the forceps removed and reapplied, but before reapplying them examine to see if the head is still in the l. o. a., for sometimes it will rotate back to its former position. If still in the l. o. a., the forceps are again introduced, the left blade being in position, the right blade is rotated in the manner heretofore stated and traction is made. In the r. o. p. position the manipulation is the same, the only difference is in rotating the left blade in the single and the right blade in the double application. In the o. a. position both blades are equally rotated, and when the concavity of the forceps look upward, lock and make traction. In the r. o. p. position both blades as in the o. a. are equally rotated and without making traction, the head is rotated to one of the anterior positions, the forceps are then removed and reapplied. In the o. a. and o. p. positions, there being more room on the sides of the pelvis, the pelvic method is preferable to the cephalic. No more force should be used in traction than the operator can use with his arm. If the operator is making traction with his right arm, the index and medius of the left hand should be upon the presenting part of the foetus so as to ascertain if the head is advancing or the forceps slipping. Traction should be intermittent, the forceps should occa-

sionally be unlocked so that circulation in the foetal head may be restored. Traction should be gentle at first, and force if required should be reached gradually. It is not good practice to deliver hastily. The passenger must be moulded and adapted to suit the passage, and the passage should be sufficiently dilated to suit the passenger. Traction should be made somewhat downward at first and until the occiput has come under the sub-pubic ligament, then the handles are gradually raised, the operator changing hands, left hand to the forceps and right hand to the perineum, so as to assist deflection. When the occipital end of the long head diameter is outside of the pelvis, and the normal delivery of the head is taking place by rotating upon its transverse axis through the arc of a circle, and the sub-occipital diameters measuring the distance from the lower margin of the pubic joint to the anterior margin of the perineum, the forceps should be removed, and in removing them the head should be firmly held by the hand not engaged in the removal. The operator should now have the head under full control, holding it back with the left hand over the perineum, allowing sufficient pressure to produce the necessary dilatation; should there be insufficient uterine contraction for the necessary pressure, the operator may press on the fundus with his left arm, or have the nurse press strongly on the fundus with her hand.

The solid blade forceps—the McLone—which I have here for your inspection is the best one that can be used in the cephalic method, from the fact that they can be easily rotated, having no fenestra to catch over the foetal protuberances and the spines of the ischium. Before applying the forceps according to the cephalic method, the obstetrician should be sure of his diagnosis; the presentation and position should be ascertained by abdominal palpitation auscultation and digital touch, and if he knows he is correct in his diagnosis Mohammed can without fear and with perfect impunity go to the mountain on every occasion. There is no danger whatever in the solid blade forceps being used by a skillful operator to shorten an ordinary labor when there is delay caused by tardy rotation. They neither do harm to the mother or child, unless it may be an occasional superficial abrasion on the child which amounts to nothing. You cannot find the cephalic method described in any of the books, and so far as I know you can find the practical application of it in but one institution in this country.

Too Many Surgeons and Too Much Surgery.

BY S. L. MONTGOMERY, CONCORD, N. C.

When we view the medical world of to-day we see the physicians decreasing and the surgeons increasing at a rapid rate. In the days of our forefathers only a few men were recognized as surgeons. Ere long the old familiar sign of "Physician and Surgeon" will be gone and a sign of "Surgeon and Physician" will be hung upon its hinges. If all these men were surgeons in the full meaning of the word, we would have too many surgeons; but all are not surgeons who claim the title. The country is rapidly filling with these little self-appointed surgeons—men who dress the stump of a finger or toe, amputated by a gin or saw mill, with antiseptic gauze and bathe it in a solution hydrargyri-chloridum corrosivum grs. 1 to ten galls. water. These men think the knife, and the knife alone, constitutes the full-grown surgeon. A pain anywhere in the abdominal region calls for the knife. Appendicitis is generally sought for and found, notwithstanding the fact that some erring brother had previously removed the poor little goose quill, whose functions have not been discovered, but is causing grief and sorrow over the land among the children of parents who used to feast on huckleberries, blackberries, and many other undomesticated fruits. The children are afraid to eat these time-honored fruits, fearing a seed might drop in the goose quill and appendicitis might and in all probability would be the result. It is strange, passing strange, how few of our ancestors had appendicitis, and how many of us have it. There are too many surgeons, or too much surgery, or probably our quills are larger than were our ancestors'. I can't account for it in any other way.

These surgeons are often called to cases of obstetrics, and if they find the head a little impacted and pains weak, they diagnose deformed pelvis, bring out their cautean symphysien, dip it in four or five antiseptic solutions, wash the whole abdomen clean (which is the best thing they have yet done) and proceed to perform symphyseotomy. The child is delivered dead and the woman does not survive the operation. A little patience and less thirst for surgery and more knowledge of obstetrics would have, in all probability, averted this dark picture.

Surgery has become so common that the private citizen sacrifices

the lives of a few of his animals to gratify his ambition to perform ovariectomy on his sows or extirpate the ovaries of his bitch, using of course all the antiseptic precautions of modern surgery—hence the scarcity of bacon and high price of pet dogs.

Man sometimes recovers from all these washings with antiseptic solutions, but the animal never. Spay your sow or bitch, she lives—perform ovariectomy with antiseptic precautions, she dies.

Randolph Medical Society.

The regular meeting of the Randolph Medical Society was held at Asheboro, N. C., October 19th, 1893—Afternoon and Night Sessions.

Dr. D. A. Stanton, of High Point, N. C., and Prof. J. W. Long, Medical College of Virginia, were present. Papers were read by Drs. W. A. Woollen on Diphtheria, J. G. Walker on Points in Surgical Cases, C. C. Hubbard on Points in Obstetrics, J. M. Boyette on Headache, and C. H. Lewis on Cerebro Spinal Meningitis. From Lewis' paper we give the following ;

"Carlyle, my son, aet. 12, received severe wounds of the head and spine, caused by a runaway. His left foot was caught and hung between singletree and crosspiece, the body falling backward, face up, across the axle, the head hanging down low enough to drag the ground, In this position he was carried about 400 yards. Large flaps of the scalp were torn up and at points the periosteum was scraped off. When taken from this position life was almost extinct. By the help of Dr. Dahging his wounds were dressed. He did not regain consciousness till the fourth day. At tenth day was able to sit up for two hours at a time. Then began to grow restless with tired feeling in head on one side and then the other, delirious ; in a few hours severe pains began along the whole length of the vertebral column and hence to the extremities. Pain increased more by movement of body than by pressure along the spine. In three days general hyperæsthesia and "tonic" contraction of left leg and arm. Episthotorms, and in a short time "chronic" convulsions began. Lockjaw soon came on. Great difficulty in swallowing. There was a backward and lateral curvation of the spine. and complete paralysis of left leg and arm. With great difficulty the right leg and arm could be moved. Powerful tonic con-

traction of the tendo achillis causing excruciating pain. It seemed that the ankle joint would be dislocated by this contraction. The head was drawn to the side, so much so that the ear pressed upon the shoulder. The mouth could be opened only wide enough to admit a small tube through which he was fed. Pulse 90 to 100. Temperature 100 to 102. Constipation and suppression of urine. Lack of peristaltic motion of bowel. There was no force to expel the excretions. To use the boy's words, "he couldn't do his business because he couldn't try." Hyperæsthesia was present to a distressing degree. He could not bear to be moved or even touched. Could swallow only small amounts at a time. Lay on his back with head drawn to one side, perfectly stiff as in rigor mortis for 20 days. Owing to this the wounds of his head could not be properly dressed. The weather was very hot, the wounds suppurating freely, and tormenting flies all combined to make it a bad case.

Right treatment could not be carried out. Counter irritants could not be used. Internal medication could not be carried out. To move bowel glycerine and castor oil as injection. To keep up life the following enema: Raw egg, milk, sugar, and brandy enough to make one pint, with a little milk, daily. Half gr. of morphine, given under the skin, every six hours for five or six days at a time. This controlled convulsions and saved life."

The question was raised as to why there should not have been brain symptoms.

"Pupils neither dilated nor contracted; responding to light, mind clear."

Dr. Long gave as a reason: the better protection of brain by long case than the spinal cord.

C. C. Hubbard raised the point as to the value of the hypodermic treatment. The boy is now in school.

The following case which he had just operated upon, was reported by Prof. Long:

Wm. Allred, aet. 23, had the lower third of the femur fractured by the falling of a horse on July 4th. The leg was immediately placed in plaster dressing, after which the patient was moved four miles in a wagon. One month after Dr. Hubbard was called in consultation, when it was found that the bones had not united, and that no callus had been thrown out. as ends of bone could be distinctly felt. One month later Dr. Long was called with Dr. Red-

ding, when it was found the bone had not yet united, neither had there been any callus formation. At each dressing the patient was chloroformed, the ends of the bone rubbed together, and replaced in plaster dressing. At the operation an incision six inches long was made from just above the right knee upward. The ends of the bones were brought up and sawed off, and then united by three silver sutures. Iodoform and plaster dressing. The patient is now doing well. His general health was very good, and nothing in family history that would prevent union. Just the absence of callus the cause of no union. Iodide of iron, arsenic, and lime water were given without benefit prior to the operation.

SAM'L A. HENLEY, President.

C. C. HUBBARD, Sec'y, Worthville, N. C.

Anæmia.

By C. C. HUBBARD, M. D., Worthville, N. C.

Anæmia is a disease characterized by the lessening of the number of red corpuscles and hæmoglobin-poverty of blood—a blood disease. The cause producing it is not certainly known. Females are more susceptible than males. “The blood of woman contains fewer red corpuscles, more water, and the salts than does that of men” (Bartholow). They can stand less of blood better than men, but it reforms slower.

Children are more susceptible to anæmia than adults. All their organs are exercising and growing at the same time, thus calling for a greater blood supply, sapping the blood of its richness; thus, when any disorder of the blood-forming organs takes place we have anæmia rapidly developing. A peculiar constitution is noted; pale, sallow skin, flabby tongue, sluggish motion—just the opposite of plethora. Some children seem to be overcharged with blood, while others have never had a sufficiency. Long nursing probably has something to do in causing the trouble; the child weaned at the tenth or twelfth month grows off better than one which is nursed longer, other things being equal. Most of the cases I have had have been those who have not been well fed, but used to bad cooking, and a “fried meat diet,” as often seen in factory places.

Others seem due to a want of meat diet, *rusting* of the intestines might express it. Poor digestion might help on the disease, but hardly cause it. The want of outdoor exercise is a prolific cause of this disease.

Hemorrhage, excessive menstrual flow, &c., may produce anæmia of one type, but it is merely the withdrawing of the amount of blood; check the abnormal flow and they rapidly recover, often without treatment. Give quinine and arsenic when it is due to malaria. These cases are not anæmia proper, but symptoms of other diseases.

Post mortem we find generally an enlarged spleen; patches of fatty degeneration in heart muscle, internal coats of arteries and in other parts; bloodlessness in all the organs—brain, bone, muscle, all, show the lack of the coloring matter. The blood is thin, watery, with less power of coagulation. "When the hæmoglobin and red corpuscles are reduced one fifth, death soon follows."

Among the symptoms is a peculiar waxy appearance of skin, pearly white glistening conjunctives, bloated eyes, tendency to dropsy if of long standing, tongue flabby, moist and tooth-marked; blue tinge of lips and nails; patient is dull, stupid, easily overdone by exercise, "short of breath," pain over heart—not a constant symptom; a feeling of oppression about heart; heart-beat quick, indistinct, "with anæmic murmur;" fainting and vertigo; temp. abnormal; urine straw-colored and generally free even when dropsy is present; constipation is the rule.

Effusions into serous cavities often take place as in pleura and peritoneum. Hypostatic congestion of lung or pneumonia may end the case. When due to the loss of blood they either die rapidly or soon recover. Treat these cases by auto-transfusion and transfusion, tr. of capsicum, aro. spts. ammon., milk, eggs and brandy. Some cases wholly recover, some get better for the time being, while many die.

The anæmia of cancer, scrofula, &c., is governed by the course of the disease on which it depends. I will say just here that many cases depend upon lymphadenoma, but it is not often recognized. The same may be said of Addison's disease of the supra-renal capsules. They should spend much time in outdoor exercise. Diet of soups, milk, eggs, and meats; eat in plenty and often; plenty of sleep; rise early.

Begin the treatment by calomel in gr. x doses in adults, to be given at least once a week thereafter. Before meals use—

R Acet. Potass..... ʒ ss.
 Tr. ferri. Chlor..... f ʒ vi.
 Strych. Sulph..... gr. i.
 Aquæ, q. s..... f ʒ vi.
 M. et Sig. Teaspoonful before meals in water.

After meals use—

R Ergot, Fld. Ext.
 Fowler's So.
 Aro. Sulph. Ac., aa.
 M. et Sig. Twenty drops in water.

The acid in this mixture serves to correct the stomach troubles which are generally present, as fullness in the stomach, &c. The ergot is given on account of the spleen being often enlarged. In girls at puberty where anæmia is present, instead of the ergot mixture use the following :

R Ac. Arsenia... gr. 1-30.
 Quinine Sulph..... gr. 2.
 Permangan, Potass..... gr. i.
 Ft. in pil. No. 1 Sig. After each meal.

The potash seems to start the menstrual flow in some cases. Phosphorus pills are also highly recommended.

If malaria is present, give quinine and arsenic. Where hemorrhage is present from any cause, the elixir of vitriol generally acts well. In using iron in this disease we must give in very heavy doses if we expect any good from its use. I have but little faith in its value in most cases, but when we give it, give enough to flood the system. Tr. chloride is the best preparation. I depend almost wholly upon calomel, arsenic and ergot in many cases. We must persist in the treatment to accomplish anything.

Annual Session of the Tri-State Medical Society, Held at Chattanooga, Tennessee.

TUESDAY, OCTOBER 17, 1893—MORNING SESSION.

Meeting called to order by President, Richard Douglas.

Prayer by Rev. John A. Stevens.

A new constitution was read by the Secretary, and made a special order for Thursday morning.

A paper by J. W. Russey, of Chattanooga, was read, entitled :

Treatment of Puerperal Mastitis.

Compression of more general utility than any simple measure, both prophylactic and curative. To be efficient for former purpose,

must be used early after labor. The chest binder of Dr. Guiterras a most satisfactory means of applying pressure. If abscess forms, pus should be evacuated early and perfectly. Washing the abscess cavity preferable to drainage tubes. If drainage is necessary, horse hair to be preferred to rubber tubing. Great care should be taken in selecting point for incision, if circumstances admit, on account of scar in cosmetic point of view.

W. G. Bogart said that mastitis could be prevented by proper prophylaxis. The breast is liable to injury by manipulation. He had found only one pump satisfactory by which the breast is steamed at the same time that the milk is drawn out. In the early stage, try abortive treatment; if abscess threatens, poultice, later, incision, cleansing with peroxide of hydrogen and pack with iodoform gauze.

G. A. Baxter—The chief point is the free exit of milk; preceding this, the excessive secretion of milk produced by improper diet and the ordinary diet should be used—a liquid diet is especially improper. As soon as there is any hardness of breast, anoint them with warm castor oil.

G. W. Drake believes in medical treatment, the internal administration of bichloride of mercury for the revulsive effect.

Richard Douglas called attention to the anatomy of the gland. Prof. Dugas is entitled to the credit of originating the only rational treatment—that by pressure. The cause is due to the presence of micrococci. The milk forms a favorable nidus for their development.

J. A. Goggans, Alexander City, Ala., read a paper entitled :

Treatment of the Diseases of the Uterine Appendages,
and presented specimen of ovaries.

These cases all come from pre-existing disease of the uterus, generally endometritis. The treatment of this condition was given : 1st. By local treatment. 2d. Amputation of the cervix. In all diseases of the uterine adnexa, rest and abstinence from sexual intercourse necessary. The three principal points of diagnosis in disease of the uterine adnexa are : 1st. Repeated attacks of peritonitis. 2d. Repeated hemorrhages. 3. Pain. Indications for operation : 1st. Those attending pelvic peritonitis, accompanied by tortuous and distended tubes, which may usually be felt in Douglas' pouch, behind the uterus. This condition may be preceded by

the history and symptoms of an abortion, a gonorrhœa, or a tubal pregnancy. 2d. The physical signs of enlarged and tender ovaries due to chronic abscess. 3d. The physical signs of prolapsed and tender ovaries, accompanied by irregular hemorrhages and incapacitating pains. 4th. Some few cases of dysmenorrhea as the principal symptom, with a possibility of its being kept up by chronic disease of the ovaries and tubes. 5th. Where hemorrhage is the principal symptom, accompanied by the ordinary signs of grave pelvic disease. 6th. In a few cases of general peritonitis, preceded by the symptoms of rupture of a pre-existing pelvic abscess, ovarian abscess, pyo-salpinx, or abscess in the appendages developed during the progress of puerperal septicæmia.

Richard Douglas endorsed the position of author as to the indications for operation, but each case must be decided on its own merits. Removal of appendages will not cure hemorrhage from the uterus, the proper treatment of which is divulsion of the cervix.

J. B. Cowan commended the paper.

P. L. Brouillette was surprised that in the discussion of the subject, electricity had not been mentioned. In his experience many of these cases had been cured by the use of this agent without curetting or removing the ovaries.

H. Berlin thought it a mistake to remove the uterine appendages for hemorrhage. Electricity applied with positive pole inside the womb will control hemorrhage by destroying the mucosa if a strong current is used. It would be impossible for the woman to conceive after this.

Dr. Brouillette objected that the Faradic current could stop the hemorrhage.

Dr. Berlin said that his experience was only with the galvanic current which was generally used.

G. W. Drake said that most physicians had not been educated so as to use electricity intelligently. It might relieve hemorrhage by reflex action.

Dr. Brouillette thought that electricity should be tried before any operation was advised.

Dr. Goggans, in closing the discussion, said he was not in favor of removing the ovaries for mere symptoms—only for organic disease. Most of the general practitioners who use electricity fail to make a differential diagnosis. In the cases presented the conditions

show that no cure could have resulted from the use of electricity.

R. M. Harbin presented a case on which he had performed tracheotomy for membranous croup.

Adjourned.

AFTERNOON SESSION.

R. M. Harbin, Calhoun, Ga., read a paper entitled :

Membranous Croup, with Report of Cases Treated by Tracheotomy.

Conclusions: 1. Membranous croup is almost invariably fatal without surgical treatment, and with medicinal treatment but little can be hoped for. 2. Any hope for an expectant plan of treatment is nil, and for the few cases that recover without surgical treatment don't demand a consideration. 3. Tracheotomy is a justifiable surgical procedure, and should be performed in all cases where our therapeutic resources have been exhausted and the patient is in danger of suffocation. In hopeless cases it affords a chance for recovery or promotes euthanasia. 4. Statistics would be better if infectious diseases were eliminated, as diphtheria, etc. 5. Tracheotomy keeps the patient alive until the pseudo membrane resolves into a muco-purulent liquid and is expectorated through the tube. 6. In all human certainty, the cases reported would have died without the operation. 7. The importance of after treatment in keeping tube moistened with lime water and the room at an equable temperature. 8. Tube should not be removed until purulent nature of sputa ceases, which is about eighth day. 9. A lack of instruments is no excuse for the non-performance of the operation, as a tube only is necessary in addition to general operating instruments.

J. R. Rathmell emphasized the uncertainty of the diagnosis between diphtheria and membranous croup, and the almost certainty of death.

W. F. Westmoreland thought the paper valuable, as it called attention to the value of surgical interference. The surgeon was generally called too late. Tracheotomy, in itself, is not a dangerous operation. He had used cords, fastened in the edges of the wound and tied behind the neck, and thought this practice resulted more favorably than with the use of the tube.

H. B. Wilson, while in the children's Hospital, N. Y., treated twenty-two cases of diphtheria, and all of these died except two, in which tracheotomy had been performed, in another epidemic, out of forty cases, there were but few deaths.

Frank Trester Smith thought the operation of little danger. In the statistics death is ascribed to the operation instead of the cause for which it was performed. Where tracheotomy was performed for foreign bodies, the statistics are good. The operation adds but little to the danger of the patient.

H. Berlin said that experiments on dogs in which croup had been artificially produced, showed that the effects of early operation were good. There was little danger from the operation itself.

G. A. Baxter read a paper entitled :

Treatment of the Omentum in Hernia Operations,

in which he advocated the removal of the redundant omentum and reported a case, in which a very large hernia consisting only of omentum was removed, weighing only four pounds. The omentum was shown, also the patient.

W. F. Westmoreland thought the omentum could be removed in toto without affecting the patient at all, unless it might be from hemorrhage or adhesions. And if any difficulty in reducing omentum, it should be resected, or if there is any suspicion of that, the vitality is effected.

E. E. Kerr asked if the tumor was omentum, or a growth from the omentum.

R. M. Cunningham thought the specimen looked like a growth.

W. F. Westmoreland said that in cases of hernia of the omentum the tissue would hypertrophy.

In answer to a question, the patient stated that the growth had enlarged suddenly.

H. Berlin stated that in the cases where the omentum protruded as here, the structure was changed and it became a lipomatous growth.

J. A. Goggans agreed with Dr. Berlin as to the pathology of the case. The omentum should be cut off whenever it protrudes.

Richard Douglas raised the point that the stump should be tied in sections, not as a whole. He preferred silk to catgut. Kangaroo was better fitted for sutures than for ligature.

Dr. Baxter, in closing the discussion, said that the tumor was composed of areolar tissue, filled with fat. The kangaroo tendon was not too stiff for tying the stump.

J. R. Rathmell, of Chattanooga, read a paper entitled :
Serous and Watery Discharges during Gestation, their Source and Significance.

The author believes that the profession has been mistaken in accepting the theory that these discharges were from the amniotic sac. Rupture of the sac is always followed by the expulsion of the foetus. There are two other sources from which these discharges can come : 1st, from the cervix ; 2d, from the decidua. Cases are related from the writer's observation, illustrating all three sources.

J. B. Cowan said the discussion of this question was interesting, but not satisfactory. In one case in his experience he thought the discharge from a case of hydrosalpinx. There had been an occasional gush of water after the pregnancy.

Richard Douglas said that hydrorrhea is frequently met with in women who have had syphilis or gonorrhœa. When the amniotic sac is opened, it is followed sooner or later by an expansion of its contents. If the fluid is amniotic, it will contain urine ; otherwise not.

G. A. Baxter related a case in which there was a large flow of amniotic fluid following a fall. He had delivered the woman of a dead child, five months later. A partial rupture is not always followed by expulsion of the foetus. He thought a chemical analysis would determine whether the fluid was amniotic.

Geo. R. West stated that a serous discharge from the cervix might be from a cancerous condition.

J. R. Rathmell, in closing the discussion, thought that it might be possible in the early months of pregnancy that the discharge might come from the tubes. None of his cases ever suffered from gonorrhœa.

NIGHT SESSION.

A paper was read by R. M. Cunningham, Birmingham, Ala., entitled :

Recent Observation of Croupous Pneumonia, with Special Reference to Prophylaxis and Treatment.

This paper was largely statistical, based on an epidemic among the convicts at Pratt Mines.

Conclusions : 1. An unusually severe, general and fatal epidemic of croupous pneumonia at this prison, coming on without apparent cause and ending, practically, abruptly. 2. That more

than double the percentage of Negroes was attacked when compared with the whites. 3. That it affected alike all ages. 4. That it attacked the robust and strong the same as those in more or less bad physical condition. 5. That it affected those who worked outside the same as those that worked inside the mines. 6. That an unusually large number was suddenly and violently attacked. 7. The pulmonary tissue involved. 8. The unusually high temperature, fast pulse, and respiration. 9. The low mortality considering extraordinary severity of the endemic, and the character of the patients.

For prophylaxis, disinfection was tried by washing the cells with a solution of bichloride and steaming the bedding. The epidemic abruptly terminated and there have been no cases since; the author believes as a result of the disinfection. Treatment consisted in the administration of stimulants and antipyretics in a majority of cases. For shock, a solution of common salt was injected hypodermically, (hypodermoclysis) one dram to a pint of sterilized water. This he believes will prevent antimortem clots, and is a remedy for shock. Specimens of antimortem clots were presented. He concluded strychnine was the best stimulant; baths the best antipyretic. Quinine and antipyrine have no place in the treatment of the disease.

W. L. Nolan could not see wherein filling up the system with a saline solution would benefit the patient.

The statistics show the death rate to be about the same under different lines of treatment.

G. A. Baxter believed the remedies of the past of little value and Dr. Cunningham has made a discovery of value to the world. It was the chloride of sodium which affected the condition of shock, not the filling the tissues with the solution.

A paper was read entitled :

Some of the Diseases of the Female Urethra,

by J. C. LeGrand, of Anniston, Ala. The paper related cases in which relief had been experienced from treatment, and others in which no treatment was of any avail.

J. A. Goggans could not add anything to the treatment. He had used an infusion of *pteris aquilina* (brake fern), with good effect. We should look for disease of neighboring structures.

H. Berlin had tried every remedy. The only remedy in some of these cases is to produce a vesico-vaginal fistula.

Richard Douglas said that in the diagnosis between organic and functional disease, inspection was necessary. Urinary disorders may be produced by abnormal conditions of the surrounding structures. The treatment suggested by Dr. Berlin is the only rational method. The relief is complete and instantaneous. These cases can retain the urine partially. The opening is not closed for six months to a year.

J. B. S. Holmes related a case in which the operation was a success.

Adjourned.

SECOND DAY—WEDNESDAY, OCTOBER 18.

MORNING SESSION.

Opened with prayer by Rev. C. G. Jones.

W. Frank Glenn, of Nashville, read a paper on the

Treatment of Septic Bubo.

He treats the cause of gonorrhœa or chancroid, and makes direct applications to the glands. He advocates rest, the application of ice, the injection hypodermically of 1 per cent. solution of benzoate of mercury, and a compress bandage. When suppuration has taken place, free incision, etc. It would be best to excise the gland as quick as it becomes inflamed. After supuration the case must be treated as a chancroid.

R. M. Cunningham thought it best to remove the gland and if possible get union by first intention.

J. W. Handley had not gotten good results from excision.

R. J. Trippe thought the best thing to do was extirpation of the glands.

H. Berlin said that a clean excision was better than incision with curetting, etc.

Dr. Glenn, on the whole, was opposed to excision except in the early stage. He does not believe in aspirating.

Dr. J. B. Murfree read a paper on the

Diagnosis and Pathology of Fracture near the Elbow Joint.

The elbow, is a hinge joint and admits of a variety of motions. It possesses the power of extension, flexion, supination, pronation and limited lateral movement. The bones that form this joint are the lower end of the humerus and the upper ends of the radius and ulna. The humerus has an expanded termination, which forms

the condyles ; the ulna has the olecranon and coronoid processes, these with the head of the radius from the joint, and are all liable to fracture. Fractures near the elbow joint are caused by external violence, (direct or indirect ; usually direct,) and muscular contractions rarely. Fractures near the elbow joint are diagnosed by the usual signs of fracture, to-wit : Loss of function, deformity, preternatural mobility and crepitation. All of these may not be present, and the diagnosis may be made by discovering the broken fragment in an abnormal position. The pathology is the abnormal relation of the bones of the forearm, solution of the continuity of the bone, formation of callus, excessively at abnormal points, inflammation of the bone, occasionally necrosis, inflammation and suppuration of the soft tissues, resulting in hypertrophy and induration, pressure or laceration of the nerves and bloodvessels. As a result, the movements are impaired and the joint is stiff or awkward. Abscess sometimes results, and sometimes paralysis.

T. Hilliard Wood, of Nashville, read a paper on

Pathology of the Sequelæ of Purulent Inflammation of the Middle Ear,

The doctor spoke of purulent median otitis, as a cause of mastoid periostitis, mastoiditis, meningitis, cerebral abscess, phlebitis and pyæmia. He then gave the pathology of each and its symptoms. He urged attention to these sequelæ, that important preventive and curative treatment may be adopted.

G. C. Savage, of Nashville, read a paper entitled :

Treatment of the Sequelæ of Purulent Inflammation of the Middle Ear.

in which he advocated measures preventive of the sequelæ of inflammation of the middle ear, outlining his treatment ; for the relief of pain, the free and frequent use of a solution of chloroform in olive oil, one dram to seven, allowing the solution to remain in the ear ten minutes at a time ; when there is a discharge, the use of a warm solution of peroxide of hydrogen ; letting it remain in the ear until bubbling ceases, and repeating this as long as there is any bubbling. For mastoiditis he recommended in addition to the above, and if this did not relieve, opening of the mastoid.

N. C. Steele wanted to impress the importance of attending to cases of suppurating ears. Most of them do not live long so that insurance companies will not insure their lives.

E. L. Jones emphasized the fact that in the cases of middle ear disease death resulted frequently, and a proper diagnosis was never made.

L. B. Graddy said that until the importance of the subject was realized, patients would continue to die by the thousands annually. The use of olive oil alone is as efficient as with chloroform. Boracic acid renders the tissue a poor soil for the growth of the micro-organisms and is a good remedy. Peroxide of hydrogen is harmless but of no use.

W. F. Westmoreland said that in mastoid cases the operation was postponed too long. In a certain class of cases, operation is necessary. No case of abscess of the brain ever recovered without operation. Without proper drainage the use of peroxide is dangerous.

B. F. Travis had used chloroform spray in his own person with good effect. He used bichloride, nitrate of silver solution, free irrigation and thorough drainage.

Dr. Savage said that if he had said nothing but to advocate the use of chloroform, he would be repaid for coming and his hearers also.

On motion, the report of the council was fixed as a special order for Thursday at 2 p. m.

AFTERNOON SESSION.

Willis F. Westmoreland, of Atlanta, read a paper on

Treatment and Prognosis of Fractures About the Elbow.

He flexes the arm at a little more than a right angle, in a position of rest. This is the best position to prevent deformity. In fractures of the olecranon process, it is not best to extend the arm fully. He uses plaster of paris bandage.

G. A. Baxter said that there was almost always impairment of motion and deformity. He uses passive motion after a few days, extending the arm at first, later putting it in a flexed position.

Richard Douglas said that Baxter's position was weak in first putting up the arm in extension, later in a flexed position. Passive motion was a thing of the past. By approximating the fragments, we use the best means to prevent ankylosis.

R. M. Cunningham believes in putting up the fracture, waiting for union and then breaking up the adhesions.

Dr. Murfree said that absolute rest was necessary to insure repair of the bone.

Dr. Westmoreland said that ancholysis might be produced by massage in certain conditions. All who put up the limb in extension acknowledged that it was wrong by changing the position. It required more skill than most practitioners possess, to put on a plaster of paris bandage properly.

Richard Douglas delivered the President's address :

Responsibilities of the Abdominal Surgeon.

As president, he advocated that a committee should select two or three members to write on selected subjects for the next annual meeting. He also thought it would be better if the society would change its place of meeting, annually. He emphasized the necessity of thorough training, cleanliness, proper diagnosis, and realization of the responsibility on the part of the abdominal surgeon.

W. E. B. Davis thought it criminal for those without experience to open the abdomen.

C. G. Savage said this would cut off ambitious young men, as they could not have the experience without operating.

Dr. Davis said he meant surgical experience, not necessarily abdominal surgery.

W. C. Townes protested that it was not necessary to have experience by operating on the living subject. Post mortems were of value.

R. M. Cunningham said that this was a specialty and required special skill, special apparatus; in emergencies, the general practitioner should operate, otherwise a specialist ought to be called.

W. E. B. Davis, of Birmingham, Ala., read a paper entitled :

The Treatment of Stone in the Biliary Ducts,

in which he advocated in those cases when it was difficult to remove the calculi from the common duct without incising the duct, after making the incision if it was very difficult to stitch up the duct, and if the patient's condition would not warrant a long operation, to introduce a glass tube and pack around it with iodoform gauze without attempting to repair the duct. These cases are usually in a bad condition to stand a prolonged operation.

Paul F. Eve, of Nashville, read a paper on cholecystotomy, and advocated the removal of the calculi whenever detected.

W. C. Townes said that three cases where he had made the diagnosis of gall stones had been relieved by large doses of olive oil.

If medical measures did not relieve, operation should be resorted to. He presented a patient on whom he had operated.

J. S. B. Holmes advocated operation if medicine failed to relieve. If the tube was occluded between the stone and intestine he would use Murphy's button to produce anastomosis between the duct and the intestine.

Richard Douglas believes that the operation of producing anastomosis between the duct and the intestines a flimsy procedure.

J. A. Goggans related a case in which floating kidney had been diagnosed, but which turned out to be a case of gall stones.

R. M. Cunningham related a case where operation had been advised, but the attacks ceased after the administration of large doses of olive oil.

W. G. Bogart would operate in case of impaction.

C. G. Savage said that the mistake made by those who used oil was that they did not put chloroform in it.

Dr. Davis, in closing the discussion, said that the secases do not get well, as a rule, without operation. The operation should be short, or the patient will die from the shock. You can never know that the last stone has passed.

NIGHT SESSION.

Frank Trester Smith presented a case in which there had been

Prolapse of the Iris,

which had been partially reduced by pushing it in with instruments and the reduction completed with the use of eserine.

J. W. Handly, of Nashville, read a paper on

Treatment of Varicocele.

The writer first speaks of the many methods and devices advanced by the medical profession in the treatment of varicocele, dividing the treatment into palliative and radical. Laid some stress upon the use of a well-fitting, properly adjusted suspensory as a most excellent palliative measure. In milder cases, besides the above, advises sound physiological advice as regards sexual habits and constipation. Mentions other palliative measures only to condemn them. Describes briefly the earliest operations by Tidal de Cassis and Sir Astley Cooper, afterwards giving at length the operations of Keyes and Bennett, the ones now generally practiced.

W. Frank Glenn said that these cases were generally neglected, advised operation unless very small. If left to themselves, atrophy

of the testes may result. If a suspensory is used, it should be well fitted. He sees no use in excising the scrotum.

J. A. Goggans thought most of the cases were due to masturbation. Dr. Glenn had made a good point in not ligating all the vessels.

Paul F. Eve said that the spermatic artery and vein should not be ligated or atrophy of the testicle would result. He believes in removing the redundant scrotum.

Willis F. Westmoreland removes the excess of scrotal tissue. He expects to get union by first intention.

R. M. Cunningham, had examined several thousand men and had found not more than half a dozen with varicocele.

W. C. Townes thought the condition more frequent among the wealthy, due to upholstered chairs and sedentary habits. Dr. Cunningham's cases were from lower classes. He would give tonics and use a suspensory in cases not demanding an operation.

J. R. Buist thought Dr. Cunningham's statistics due to the fact that most of the cases were negroes.

Dr. Eve stated that a United States recruiting officer had stated that out of twenty cases examined in one day, eighteen had enlarged scrotal veins. He thought his statement that seven out of ten males had a tendency to varicocele within bounds. All these were not operable cases.

Dr. Handly, in operating, would prefer local anæsthesia unless the patient was very nervous.

L. B. Graddy, of Nashville, read a paper entitled :

Etiology, Pathology and Prevention of Ophthalmia Neonatorum.

The etiology, pathology the same as gonorrhœal ophthalmia or gonorrhœa of the urethra, being produced by the gonococci—all of these cases are produced by inoculation. Every abnormal discharge, toward the end of pregnancy, should be regarded with suspicion. These cases are inoculated during the washing. He recommended that the lids be washed with a 1 per cent. solution of nitrate of silver, which should be left on the lid twelve seconds, after which the eyes should be washed with clean water.

B. F. Travis read a paper on

Treatment of Ophthalmia Neonatorum.

In the early stage he advises cleansing the eyes with a boracic

acid solution and the application of cold water. Later the use of strong solutions (40 to 60 grs. to ounce) of nitrate of silver in the purulent stage.

G. C. Savage, in discussing the above paper stated that there were cases on record where pus gushed from between the lids when they were first opened. He believed that other fluids then gonorrhoeal would produce purulent conjunctivitis. Crede's method is effective and apparently painless.

J. B. S. Holmes thought the responsibility rested with the obstetrician.

Richard Douglass said that the responsibility went back of the obstetrician, that it rested with those doctors who failed to cure their cases of gonorrhoea.

R. M. Cunningham called attention to the fact that the negroes rarely were blind from this disease.

W. Frank Glenn and J. B. Cowan thought the disease always gonorrhoea of the conjunctiva.

N. C. Steele endorsed the use of strong solutions of silver, 40 to 60 grains.

J. B. S. Holmes, of Rome, Ga., read a paper on

Movable Kidney.

Pressure on the kidney always produces nausea and faintness—this is an important point in diagnosis. If much disturbance and kidney cannot be kept in place with a bandage or an abdominal support, the kidney should be extirpated. The operation was described. We should be satisfied that the other kidney is in a healthy condition.

THIRD DAY—THURSDAY, OCTOBER 19TH.

MORNING SESSION.

Prayer by Rev. W. J. Trimble.

On motion, that a committee of five be appointed, to whom should be referred the new constitution for revision and amendment, also the recommendations of the President and said committee, to report to the Secretary, on the morning of the first day, next year, who will have changes proposed published. Carried.

Article IV of the constitution was changed so as to allow the society to meet elsewhere.

A motion was carried that none be allowed to vote or have the privilege of the floor who have not paid their dues for the current year.

On motion, the society reconsidered the vote to have the election at 2 p. m., and proceeded with the election of officers. The following were elected by ballot :

PRESIDENT.....J. B. S. HOLMES, Atlanta, Ga.
 VICE-PRESIDENTS...JAMES A. GOGGANS, Alexander City, Ala.
 DAN: H. HOWELL, Atlanta, Ga.
 T. HILLIARD WOOD, Nashville, Tenn.
 COUNCILLORS.....W. E. B. DAVIS, Ala.
 G. W. MILLS, Ga.
 J. B. MURFREE, Tenn.
 SECRETARY....FRANK TRESTER SMITH, Chattanooga, Tenn.
 TREASURER.....W. C. TOWNES, Chattanooga, Tenn.
 RECORDER.....W. L. GAHAGAN, Chattanooga, Tenn.

The consideration of new constitution was voted a special order of business for the third day of the next annual meeting, at 9 a. m.

On motion, the society tendered a vote of thanks to the President for the masterly and courteous manner in which he had presided.

A committee, consisting of J. B. Cowan, W. F. Westmoreland and W. E. B. Davis, was appointed to draft suitable resolutions of thanks.

AFTERNOON SESSION.

The following committee was announced to revise the constitution : W. E. B. Davis, R. M. Cunningham, J. B. Cowan, W. F. Westmoreland and W. G. Bogart.

Y. L. Abernathy, of Hill City, read a paper on the
Treatment of Typhoid Fever.

The author claims that it is impossible to diagnose between typhoid and continued malarial fever in many cases. He believes in an aggressive form of treatment, and advocates the use of quinine and mercury in these cases. He also relies on hydrotherapy by the Brand method.

J. B. Cowan could not endorse the use of quinine. His sheet anchor is alcohol, using it as coal in a grate, to allow the man to burn this instead of burning the tissues. He gives salicylates in small doses—three and a half grains. He had not seen a case of typhoid fever in fifteen years.

G. T. Prince said that a typical case of typhoid was rarely seen. The treatment must be varied according to the type. In perforation, laparotomy should be performed. By using potass bromide first, he could use quinine.

Dr. Reeves, in discussing the paper, formulated typhoid fever as follows : An acute contagious febrile affection derived from an ante-

cedent case of the disease and depending for its communication from person to person upon the presence of a specific micro-organism, which is believed to be of well-known morphological characteristics—a *bacillus*—and which can be cultivated outside the human body. The disease prevails less frequently in tropical and sub-tropical countries than in the temperate zone, is both endemic and epidemic in its visitations; attacks, preferably, young persons and those in middle life; is of long duration, but varying between ten and forty days beyond the *prodromic* period, which may cover from one to or even twelve days. There is profuse diarrhœa, or, at least, a relaxed state of the bowels, with “pea-soup,” or “ochre-colored” stools; and at all stages a marked susceptibility to the action of laxative medicine; intestinal hæmorrhage in many cases, and in a few perforation of the bowels; epistaxis, either slight or profuse; tympanites, with gurgling produced by pressure over the ileo cæcal valve; dullness of hearing, with mental hebetude, or morbid vigilance; headache, disappearing during the second week; delirium either mild or violent, with *subsultus tendinum*; rose colored lenticular eruption during the second week, coming out in crops and disappearing in the same order; fever-curve showing steady elevation of from one to three degrees in the evening with a fall of the same number of degrees in the morning for the first four or six days, and unlike the curve of any other acute febrile or inflammatory disorder; cough and bronchial rales; singular prostration of muscular strength; early heart failure and a dicrotous pulse. The tongue soon becomes dry, and shows, in grave cases, a brown stripe in the middle, with *sordes* on the teeth and gums; in fatal cases, death occurs during the third or fourth week, with the constant and characteristic lesion of the small intestine involving Peyer’s glands, and with enlargement of the spleen; Convalescence is tedious; true relapse is not infrequent, and the disease affords as perfect immunity from subsequent attack as does scarlet fever or smallpox.

Not a New Disease.—Belief in the spontaneous origin of the disease has greatly retarded the discovery and general diffusion of correct knowledge on the subject; for, by parity of reasoning, such faith is without substantial support when the question is studied with the life history of the human race. On the other hand, the doctrine of permanency of original types of contagious diseases has probably, as remote antiquity for its origin, as stable a foundation

for all future time, and as many unanswerable arguments in its support, as the doctrine of the permanency of the different types of the human race—each type with its entirely different capacities, physical and mental, and known to have existed for at least five thousand years.

P. L. Brouillette believes the cold bath the best antipyretic, prefers using first a tepid bath and reducing the temperature of the water. Quinine must be given in large amount within an hour to get antipyretic effect, as it is eliminated.

Willis F. Westmoreland said that tepid baths were less depressant than the cold baths.

R. M. Cunningham said: 1. We have typical typhoid fever. 2. We have atypical typhoid fever. 3. We have typical malarial fever. 4. We have atypical malarial fever. 5. We have an unknown fever that I call continued. Baths best antipyretics. Whisky and strychnine best stimulants. 434 cases observed in four years. 80 typhoid—10 deaths, 8 complicated. 178 continued—2 deaths, both complicated. 176 uncomplicated fevers—no deaths. Does not believe in antiseptic treatment. As a routine treatment he uses the mineral acids.

The following resolutions were adopted:

“For five years annually the Tri-State Medical Society has enjoyed the hospitality of the medical fraternity of Chattanooga, a hospitality that is only bounded by their opportunity to share the liberality and magnificent hospitality which particularly characterizes the Chattanooga doctor. There must be something in the atmosphere or water, or more likely in the fact of this city being surrounded by these grand mountains which has the effect to draw out and develop the better qualities and higher instincts that belong normally to every man’s heart, and these magnificent surroundings have succeeded in developing a body of medical men that are not only an honor to the profession, but have and are now giving to this beautiful city a reputation that has become national.

“The Tri-State Medical Society feels to-day as we have unloosed the cable and from this day forward we are afloat and will have our annual home in Georgia, and then Alabama, and that we fully appreciate the sensation of a child leaving its paternal home and going out into the world to try his fortune. We fully appreciate the importance of this step, and as we leave the home nest and wander

in other lands our thoughts, our affectionate remembrance and our prayers will center here, and our thanks and gratitude and heart-wishes for the medical fraternity of Chattanooga will ever grow brighter and brighter as the years go by. Be assured that in the heart of every member of the Tri-State Medical Society the memory of many kindnesses and splendid hospitality will ever remain a green spot, the memory a thing of beauty and a joy forever."

Dr. W. C. Townes read a paper entitled :

Pathology and Treatment of Goitre.

This paper is based on the observation of cases seen during a recent trip through the region of the Alps. For treatment, extirpation of the gland is advocated.

Dr. J. E. Reeves said Dr. Townes' paper was of more than common interest, notwithstanding the rarity of the disease in this country, and fully represented the general knowledge on the subject.

The Secretary was voted a salary of one hundred dollars for the current year.

NIGHT SESSION.

C. W. Barrier, of Columbus, Ga., read a paper on *The Elastic Dressing Applied to Incomplete Anchylosis of the Knee*, of which the following is a synopsis :

The elastic dressing applied to incomplete anchylosis of the knee. Report of case. Description of the elastic dressing, with method of using it. Indications of treatment of such a case : 1. Arrest the atrophy of the synovial membrane and restore it to its function. 2. Break up existing adhesions and prevent the formation of others. 3. Restore the tendons of the hamstrings to their normal length. 4. Arrest of the atrophy of the tendon of the quadriceps and stimulate it to antagonize the hamstrings. Conclude by showing how these indications are met better by the elastic dressing, than by an operation or a fixed dressing. Query : If such dressings were more frequently applied in incipient anchylosis, would there not be a less number of cases of complete anchylosis, and still fewer radical operations for same ?

R. J. Trippe had had good results from breaking up adhesion.

J. B. Cowan said that many of these patients were neglected, and as a result there were many deformed joints.

Willis F. Westmoreland insisted on the importance of prevention. A trivial injury may result in the destruction of the joint.

H. Berlin related his experience with the

Action of the Galvanic Current on the Uterine Tissue.

The paper contains the results of experiments. A current was passed through the uterine tissue, which was then subjected to microscopic examination. In one case the experiment was made on the living subject previous to hysterectomy, in the other cases the cadaver was used. He concluded that curetting would accomplish the result much more quickly.

Geo. R. West said that according to experiments electricity acted not only at the poles but also throughout the tissue.

W. E. B. Davis believes that electricity has its place in gynecology, but that many claim too much for it. Curetting is preferable, although the same result might be accomplished in many cases by electricity.

J. B. Cowan thought the current was used in a milder form than to produce necrotic tissue.

W. F. Westmoreland, after spending much for electrical apparatus, had concluded to let it alone in most cases.

G. W. Drake said that electricity had accomplished most by those who had studied the subject. It should not be condemned from the reports of those who did not understand its use.

J. P. Stewart thought that there was no doubt of the tonic effect of electricity.

H. Berlin said that he only wanted to prove the microscopical effect of the current and had found necrosis. He had no effect from farradism.

J. B. Cowan, of Tullahoma, Tenn., made an address on

Medical Ethics.

He spoke of the violation of the code in consultations. It is the duty of the medical societies to lift up the profession. We get legislation to protect the people and to elevate the profession so that the code could operate on the members of it. He called attention to the splendid organization of the profession in Alabama.

W. F. Westmoreland thought the profession had reached that point where the code of ethics as a published document should be abandoned.

G. A. Baxter said that a consultant could steal a patient within the code of ethics.

J. R. Rathmell believed in a written code. The code is a statement of the principles which are the written result of the experience of the profession.

J. P. Stewart said the written code was of value to protect us from those who violate it.

G. W. Drake said that any argument for abolishing the code would apply equally to any written law, even to the Word of God. We object to consulting with irregulars, not on account of their method of treatment, but on account of advertising.

Y. L. Abernathy stated that we should follow the golden rule. A code is needed for violators of the law.

The following were read by title :

Report of Physical Science, Chicago, August, 1893—John E. Purdon, Cullman, Ala.

The Significance of Albumen in the Urine in Pregnancy—E. T. Camp, Gadsden, Ala.

On motion, it was decided to hold the next meeting in Atlanta, Ga., on the second Tuesday in October, 1894.

Adjourned.

Notes.

Few physicians, who have practiced medicine five years, but have assured some patient relief, in the use of cod liver oil, only to see the patient sink lower and lower, from want of power to digest the remedy. Cod Liver Glycerine removes this difficulty; capable of being diluted with water, requires no digestion, but is a digestive stimulant. If you give Cod Liver Glycerine it will be assimilated. It combines readily in all prescriptions.

The Superintendent and Surgeon in charge of St. Louis City Hospital. Dr. A. Marks, announces that Cod Liver Glycerine is now used in that institution. Its power to mix uniformly in any proportion, in all prescriptions, or to mix with water and spirits without separating on standing, renders it the most desirable reconstructive in the convalescent period of difficult surgical cases, or acute diseases attended with emaciation; while its digestive properties insure its therapeutic action. †

Tramp—Can you assist me along the road, mum ?

Lady of the House—Personally, I cannot, but I will unchain my dog, and I know he will be most pleased to do so.—*Tid Bits.*

SYR. HYPOPHOS. CO., FELLOWS

Containing the Essential Elements of the Animal Organization—Potash and Lime;

The Oxidising Agents—Iron and Manganese;

The Tonics—Quinine and Strychnine;

And the Vitalizing Constituent—Phosphorus; the whole combined in the form of a Syrup with a Slightly Alkaline Reaction.

It Differs in its Effects from all Analagous Preparations; and it possesses the important properties of being pleasant to the taste, easily borne by the stomach, and harmless under prolonged use.

It has Gained a Wide Reputation, particularly in the treatment of Pulmonary Tuberculosis, Chronic Bronchitis, and other affections of the respiratory organs. It has also been employed with much success in various nervous and debilitating diseases.

Its Curative Power is largely attributable to its stimulant, tonic, and nutritive properties, by means of which the energy of the system is recruited.

Its Action is Prompt: it stimulates the appetite and the digestion, it promotes assimilation, and it enters directly into the circulation with the food products.

The prescribed dose produces a feeling of buoyancy, and removes depression and melancholy; *hence the preparation is of great value in the treatment of mental and nervous affections.* From the fact, also, that it exerts a double tonic influence, and produces a healthy flow of the secretions, its use is indicated in a wide range of diseases.

NOTICE--CAUTION.

The success of Fellow's Syrup of Hypophosphites has tempted certain persons to offer imitations of it for sale. Mr. Fellows, who has examined samples of these, **finds that no two of them are identical**, and that all of them differ from the original in composition, in freedom from acid reaction, in susceptibility to the effects of oxygen when exposed to light or heat, **in the property of retaining the strychnine in solution**, and in the medicinal effects.

As these cheap and inefficient substitutes are frequently dispensed instead of the genuine preparation, physicians are earnestly requested, when prescribing the Syrup, to write "Syr. Hypophos. **Fellows.**"

As a further precaution, it is advisable that the Syrup should be ordered in the original bottles; the distinguishing marks which the bottles (and the wrappers surrounding them) can then be examined, and the genuineness—or otherwise—of the contents thereby proved.

Medical Letters may be addressed to

Mr. FELLOWS, 48 Vesey Street, New York.

Charlotte Medical Journal.

E. C. REGISTER, M. D.,

J. C. MONTGOMERY, M. D.,

Editors and Publishers,

NO. 36 SOUTH TRYON STREET,

CHARLOTTE, N. C.

✧ SUBSCRIPTION, \$2.50 PER YEAR. ✧

Articles intended for the Original Department of the Charlotte Medical Journal will be accepted only with the understanding that they are contributed to it exclusively.

DR. SCHAFF, an aged and popular physician of High Point, N. C., died in that place on Wednesday night, Oct. 25th.

DR. R. L. PAYNE, Jr., of Lexington, N. C., has been awarded the prize of \$100 given by Dr. Hunter McGuire to the Medical Society of Virginia for the encouragement of original work. The essay this year was on "Obstruction to the Functions of Micturition."

WE call attention to the change of the advertisement of the Munson Typewriter. This machine was awarded the prize at the World's Fair for its general excellences, &c. Its mechanism is simple, execution beautiful, and is the best typewriter recently placed on the market.

THE attention of non-subscribers who receive a copy of this number of THE CHARLOTTE MEDICAL JOURNAL is particularly directed to the slip enclosed. We are desirous of increasing our subscription list, and in order to do this we make the unprecedented offer therein contained. Do not let this opportunity pass, it is one which you may not have again for sometime to come. We are desirous of having every progressive physician in this and adjoining States a subscriber, and we are certain that if you become one, you will continue to remain such.

THUS far an outbreak of cholera in the United States has been avoided. On October 9th the steamer Russia arrived in New York from Hamburg with two cases of cholera on board, there having been five deaths on the voyage. Happily there has been only one death since her arrival at quarantine, and no new cases have developed. Officers have shown much skill and have been very faithful in performing their duty.

SELF-SACRIFICE.

The Boston Medical and Surgical Journal says : To the unthinking, the surgeon at the operating table or the physician in the wards for infectious diseases is only a man pursuing his profession. But under the impassive exterior will be found "the stuff of which martyrs are made." He holds his life none too precious to be sacrificed, if need be, in relieving humanity's physical suffering, and surely "greater love hath no man than this, that a man lay down his life for his friend."

SURGEONS' NERVE.

You often hear surgeons spoken of as heartless, cruel, having the nerve to do any thing. They forget that this is a surgeon's business, his profession, his daily bread. He has been educated to it, and in this connection we quote the following from Longman's Magazine :

"It is the common belief that a surgeon must possess what is spoken of as an extraordinary good nerve, and you may perhaps doubt if you possess this. At the same time you must bear in mind that in the case of a surgeon the coolness or calmness which is so admirable and necessary in an operation does not imply the possession of any remarkable personal quality, but it is the simplest result of a complete knowledge of what he is doing. It is rather the natural outcome of his accurate familiarity of anatomy, and his daily habit. A trooper would require a very fine nerve to go to a masthead, or a sailor to ride an unmanageable horse across a country, but a sailor's confidence aloft is due more to a matter of habit than to any particular amount of courage. In saying this, I do not wish to depreciate the calmness of the surgeon in the face of difficulties, but I may tell you quite plainly that if you haven't enough courage to be a surgeon I should be very much ashamed of you, and you would turn out to be a very poor creature, whatever occupation you might follow. Still this fact remains, and you may perhaps be interested to hear that I, who have known many good surgeons, have never seen one who has not possessed a very fine courage. In short, a very good surgeon is, in my humble opinion, a very fine fellow, and when I see (as I do see) the extraordinary achievements of modern surgery, I am very proud of be-

longing to a profession which has made life so much more endurable and prolonged to the human race. So, possibly, the great fascination which surgery no doubt possesses to many, appeals more strongly to men of courage and determination than to those persons of more weakly constituted minds, or to those who are less vertebrate altogether."

FOOT BALL EPIDEMIC.

As the base ball season closes, the foot bail epidemic breaks out in our midst. You read of nothing but foot ball, the great sporting game of the season. It is certainly the most brutal and dangerous game that exists. Many a life has been wrecked in early youth from playing foot ball. Every college has its foot ball team and are daily combatting against each other. At one college in this State the ball team play till dark and then run around a half mile track six times in succession. Is this, can this be, conducive to first-class mental work. Can a mind do good work wrapped in a broken limb, or tired body? We append the following taken from the American Lancet:

"No sort of athletics compensates for bodily deformities. Every physician is familiar with cases in which over-development of muscle in the training for certain games has resulted disastrously. Excessively developed muscles may be good for show, but they are not good for healthy life, especially in brain workers. Athletics for competitive feats of strength and endurance are pernicious, illogical and dangerous (Lydston). It were far better for the average boy or man to be content with perfect control and excellent nutrition of muscles of moderate development. Strong men are not best constructed by the so-called perfect training.

Brain-workers and those who lead sedentary lives are unwise in attempting to become general athletes. That sort of athletics is best which (1) is free from serious danger to life or limb; (2) is natural and pleasing to the individual taking it; (3) promotes a healthful flow of blood through every portion of the body, the more equably the better; (4) is regular as is the hour for meals and sleep; (5) permits cheerful companionship; (6) does not seriously disturb the ordinary duties of life. In short, those athletics are best for the student which are subordinated to his work as a student and the part he expects to take in after-life. Base ball, foot ball,

lawn tennis, as friendly games for simple exercise, are well enough, but when entered into "to beat" they sadly lack the features needful to commend them to the thoughtful physician."

CALOMEL AS AN ANTIPYRETIC.

In a paper read before the late Pan-American Medical Congress, Doctors R. J. Nunn and A. D. Simmons advocated calomel as an antipyretic, especially advantageous in typhoid and continued fever. They drew the following deductions :

"Calomel is a sure and safe antipyretic, reducing the temperature from two to three degrees in a few hours.

"Small doses are of no avail.

"The ingestion of large doses is followed by no untoward event, no ptyalism, no hypercatharsis.

"Diarrhoea, hæmorrhage, albuminuria, and tympanites are not contra-indications to its use.

"Even where there is no cathartic action induced it insures reduction in temperature.

"Calomel acts best in combination with soda, bismuth and pepsin.

"In some instances the remedy cuts short an attack ; in others, while it may have no influence on the temperature *per se*, it modifies the system, and by keeping febrile activity in check, aids materially in the management of the case."

We take the above from the Medical Age, and its eminent editor makes the following comments :

"This coincides largely with our own experience, save that we fail to see any special advantage in combining calomel with soda, bismuth, and pepsin ; indeed, to a certain degree bismuth is contra-indicated in connection with calomel, and it certainly will inhibit the action of pepsin. Calomel is best administered with monobromate of camphor, the dose of the latter being regulated by that of the former. Even forty grains of mercurous chloride is no contra-indication from point of size of dose. The results are much more satisfactory than when smaller amounts are ingested ; there is absolutely no danger of salivation unless administration is followed by large quantities of acid ; there is no nausea induced, and, as Doctors Nunn and Simmons remark, no hyper-catharsis. On the contrary, the action is thorough and prompt, free from all discomfort. Again, the ingestion of a single large dose accomplishes

much more than can be obtained by a series of small doses distributed over several days."

Calomel is not an antipyretic, administered in the way these gentlemen suggest. Given in the diseases they mention, it prevents bacterial fermentation that is constantly going on in the alimentary canal, the toxic elements of which, when absorbed into the system, cause high fever. Calomel has no antipyretic action at all on a fever, when the cause is outside of the alimentary canal, unless it is due to a local inflammation, where it can be applied effectually. In continued fevers, and especially typhoid, where the fever ranges above 103 F., with diarrhœa and tympanites, there is nearly always something wrong in reference to the management of the case. If the high fever is due to mental or physical exercise, calomel will have no effect whatever on it. If it is due to an unusually large amount of the specific typhoid poison in the system, it will also have no antipyretic effect, but if it is due to some error in diet, or to extensive ulcerations of the bowels, its action then will indeed be very beneficial. Calomel given by the mouth may not have, directly, any favorable influence on the ulcerated bowel, but its action on the glands of the alimentary canal, causes them to pour out, in abundance, disinfectant fluids that will effect very favorably the ulcerations.

A NATIONAL BUREAU OF HEALTH.

The clipping below is taken from the Charlotte (N.C.) Observer, and is from the fertile pen of our well-known and esteemed friend, Dr. J. Wellington Byers, of this city :

TWO IMPORTANT BILLS WHICH CONGRESS WILL BE CALLED ON TO
CHOOSE BETWEEN.

The medical profession of this country are considerably agitated on the subject of a national law for the suppression and control of epidemic and contagious diseases. The more or less prevalence of cholera and other infectious diseases in various parts of the world, which are capable of spreading under certain unsanitary conditions, has forced this subject to the front and the occasion has apparently arrived when some legislation of a national character will in all probability be enacted during the forthcoming session of Congress. For this purpose, at least two bills will be introduced.

The first proposes the organization of a separate department in the cabinet, the head of which shall be the Secretary of Public

Health, who will possess a parity of dignity, power and authority with the other members of that body. This proposition was endorsed by the recent Pan-American Medical Congress, and a committee was appointed to draft a bill and bring it before Congress at its next meeting, and use every effort to have the same enacted.

A second and distinct measure from this is the one which is being circulated and supported by the medical profession of New York city. They propose that a Bureau of Public Health be established within the Treasury Department, this bureau to consist of a commission of fifteen medical men, two of whom shall be appointed by the President, at large, nine shall come from the sanitary districts into which the country shall be divided, and one each from the army, navy, marine hospital service, and department of justice. The first eleven of these shall have a per diem of ten dollars while actually engaged in service, and the latter four shall have no salary other than the regular one as officers of the government. The duties of the bureau shall be to collect and diffuse information upon matters affecting public health, to advise the several departments of the government, the executive of the several States and all health authorities on all questions submitted to them, to secure the best sanitary conditions of vessels from foreign ports, to prevent the introduction of contagious diseases into the United States, and from one State to another, and to co-operate with the State and other authorities in their sanitary duties in the suppression of disease. In addition to these there are a number of other important duties prescribed, among which may be mentioned the investigation in this and foreign countries in regard to the nature and origin of epidemic and contagious disease, the cause and particulars of outbreaks, and to employ experts as the exigences of the service may require.

Taken in its purpose and entirety, the measure is a very important one, bearing upon the welfare of all the people. Public health is public wealth, and the loss from sickness and death and the irregular interruption of trade and commerce by unwise and irrational sanitary laws is an important factor in every department of life and business. In a systematic, general and co-operative plan between State and nation, nothing is lost but much is to be gained. That there is need for legislation looking towards these ends, is obvious to all who have concerned themselves with these matters.

The continued presence of epidemic disease in foreign lands acts as a menace to the health of the world, and, in so far as is possible, should be controlled.

BOOKS REVIEWED.

SUPPLEMENT TO THE REFERENCE HAND BOOK OF THE MEDICAL SCIENCES. By Various Authors. Edited by ALBERT H. BUCK, M. D. Vol. IX. 4to. pp. 1076. Illustrated by Chromo-lithographs and Fine Wood Engravings. New York: William Wood & Company. 1893.

Wood's Reference Hand Book of the Medical Sciences is the most valuable and best known general work on the medical sciences ever published in the English language. The popularity of the original volumes of this monumental work was indeed in the highest degree flattering, both to editor and publisher. With the addition of Vol. IX, or the Supplement, it is unquestionably the most complete system on general medicine now published, and cannot but receive that continued appreciation which its merits so justly demand. As time passed, it became evident to the publishers that unless some action was taken this work would become obsolete, and they were in doubt whether to issue a new edition or publish supplementary volumes. They very wisely decided to adopt the latter plan, the first volume of which is now before us. The advances made in medicine and surgery of established worth, which has been adopted since the completion of the original work, has been incorporated in the present volume, and it now stands as a monument to the work done by the medical profession and the progress which characterized the labors of those who have the welfare of their fellow men at heart. This volume is especially rich in additions to the departments of materia medica and therapeutics, neurology; military surgery, the anatomy of the nervous system and general surgery. To analyze this work would be impossible—it would involve the analysis of a complete library. It may be said, however, that very few subjects have escaped the keen and discriminating eyes of the contributors. The article entitled General Principles of Prophylaxis, by J. Wellington Byers, of this city, is indeed very interesting, and is especially so to the profession of North Carolina. The doctor has for several years made this subject an object of special study, and several of his original ideas in reference to how disease germs enter the body, how they affect healthy tissues and how remedial agents check their activity, has

attracted the attention and approval of a great many eminent physicians. The publishers have made it a point to have everything connected with the mechanical execution of the work in the best style possible, and they have certainly succeeded in their aim. We are certain that no subscriber to the entire work will let the opportunity pass by of acquiring this the first supplementary volume.

AN ACCOUNT OF BELLEVUE HOSPITAL; With a Catalogue of the Medical and Surgical Staff from 1739 to 1894. Edited by ROBERT J. CARLISLE, M. D. Published by The Society of the Alumni, of Bellevue Hospital, New York. 1893.

He who has ever attended Bellevue Hospital will be greatly interested in this book. It is by far the largest hospital in the metropolis, and it is the birthplace, the foundation of many bright lights in the medical profession. In reading the pages of this book one is particularly struck with the growth of this hospital and with New York City. You can hardly imagine the northern limit of this great city to be anywhere on Cortlandt street or at Park Row, and think even of the space lying between 26th and 49th streets being a noted farm—and yet this hospital was once situated, in its early days, at each of these places. Truly it traces its origin from the humblest source. Now it stands as being the oldest and among the best in the United States. This volume contains nearly 400 pages. More than 100 pages are devoted to a history of the hospital from 1736 to the present time. As I said before, this history of Bellevue will be of great interest to every physician, and especially those who have spent some months of their lives within its walls. The remaining pages are occupied with alphabetically and chronologically arranged lists of the medical officers. The pictorial views are quite numerous, including a number of exterior and interior views of the institution. These are well executed. It contains portraits of Dr. Valentine Mott, Dr. James R. Wood, Dr. Alonzo Clark, Dr. Fordyce Barker, Dr. Wm. H. Van Buren, Dr. Willard Parker, Dr. Austin Flint, Dr. Isaac E. Taylor, Dr. Frank H. Hamilton, Dr. Benjamin W. McCreedy, Dr. John J. Crane, Dr. Henry B. Sands, Dr. Geo. T. Elliott, and Dr. Edward B. Dalton. Only likenesses of the dead are given. This book is of great interest and value, and is indeed creditable to the Society of the Alumni and Dr. Carlisle. Copies of this handsome book may be ordered of Dr. Hermann Biggs, No. 5 West 58th street. The demand for this work should be great.

A DICTIONARY OF TREATMENT, OR THERAPEUTIC INDEX, including Medical and Surgical Therapeutics. By WILLIAM WHITLA, M. D., Professor of Materia Medica and Therapeutics in the Queen's College, Belfast. Revised and adapted to the Pharmacopœia of the United States. In one octavo volume of 917 pages. Cloth, \$4.00. Philadelphia: Lea Brothers & Co. 1892.

A book of this kind has long been needed by practitioners. Its make-up is something new, a new departure, indicating that the growth and progressiveness of medicine has no limit. It is almost impossible to conceive of a work that will be of greater utility to the practitioner. The author is widely known, both as a teacher and practitioner, and he has furnished a volume which should occupy a position on the office table of every physician and surgeon. The most approved methods of treatment, medicinal and non-medicinal, including electricity, massage, baths, surgery, etc., etc., are fully and distinctly placed before the reader. It contains 900 pages and gives in detail the treatment of every disease. The Consideration of Poisons and their Antidotes is nicely given, being arranged alphabetically, and in an emergency can be referred to in an instant. For quickness and convenience, the author has arranged the treatment of diseases in alphabetical order also. No one can appreciate the value of this book until it has been carefully and thoroughly examined. He who wishes to keep posted as to the most recent and approved methods of treatment should immediately come in possession of this work. Its reading will certainly be enjoyed by every physician. At the close is found a copious index, which still further facilitates reference. The book is printed in excellent style, as regards paper, typography and binding, characteristic of Lea Brothers' books. We highly commend the work to our readers.

THE PRINCIPLES AND PRACTICE OF SURGERY. By JOHN ASHHURST, JR., M. D., Barton Professor of Surgery and Clinical Surgery in the University of Pennsylvania; Surgeon to the Pennsylvania Hospital; Senior Surgeon to the University Hospital and Consulting Surgeon to Womans' Hospital. Sixth Edition. Enlarged and thoroughly revised. In one octavo volume of 1165 pages, with 656 engravings and colored plates. Cloth, \$6.00; Leather, \$7.00. Lea Brothers & Co., Publishers, Philadelphia, Pa.

This is a new and most excellent work on Surgery, and it is indeed a pleasure to us to recommend it to the student as a text book or a guide for the general practitioner. The fact that this is the work of Prof. John Ashhurst is a sufficient commendation. It very clearly considers in detail all surgical injuries and diseases to which the human race is liable. Every advance in surgery of any

worth is carefully considered and found in its proper place. It is characteristic of Dr. Ashhurst's former writings, and especially so in the other editions of this work, to have correctly and conveniently arranged statistical tables up to date, which always added a great deal to the interest and value of his works, and the volume before us in this particular is equal if not superior to the previous editions. We have never had published in this country a volume on surgery that was superior to this one, and it justly deserves the support of the entire medical profession. A copy of it should be in every physician's library. We congratulate the publishers in getting out a volume so handsome, and displaying in such a high degree the typographic art.

MANUAL OF PHYSICAL DIAGNOSIS; For the Use of Students and Physicians. By JAMES TYSON, M. D., Professor of Clinical Medicines in the University of Pennsylvania, and Physician to the University Hospital; Physician to the Rush Hospital for Consumption and allied diseases; Fellow of the College of Physicians of Philadelphia; Member of the Association of American Physicians, etc. Second Edition. Revised and Enlarged. Philadelphia: P. Blakiston, Son & Co., 1012 Walnut Street. 1893.

This is a most complete work on Physical Diagnosis, written by one whose success as a teacher and practitioner eminently qualifies him for the accomplishment of this task. Conciseness with sufficiency, a task acknowledged to be difficult, has been the writer's object, and well has he accomplished it. This book contains about 250 pages, dotted here and there with excellent and useful illustrations. In this, the second edition, the author has seen fit to add under the heading "Appendix," several subjects not strictly belonging to physical diagnosis, such as the examination of blood, the various chemical examinations required in diagnoses of the stomach, and directions for making an autopsy. These additions will prove most useful. The work is tastefully and substantially gotten up. To those who were not so fortunate as to attend private instructions in physical diagnosis, this work will be of unbounded value, and it will aid others in keeping fresh in their minds the teachings and instructions they may have received.

TRANSACTIONS OF THE NEW YORK STATE MEDICAL ASSOCIATION FOR THE YEAR 1892. Vol. IX. Edited for the Association by OGDEN C. LUDLOW, M. D., of New York County. Published by the Association, 64 Madison Avenue, New York City.

There are very few societies that can present a volume of proceedings and papers of nearly 900 pages. Such papers and discussions are seldom read. It is indeed an object lesson, and the New York State Medical Association deserves to be congratulated on its success.

SURGERY. A practical treatise with special reference to treatment. B. C. W. MANSELL, MOULLIN, M. A., M. D., Oxon, etc. Assisted by various writers on various subjects, with 600 illustrations, many of which are printed in colors, about 200 having been made from special drawings. Second American edition, revised and edited by John B. Hamilton, M. D., LL. D., etc. Philadelphia, P. Blakiston, Son & Co., 1012 Walnut St., 1893. Cloth, 4to. pp. 1238. Price \$7.00.

The second edition of this work follows the first with an interval of only two years, thus showing the great appreciation it has received at the hands of the profession. The work contains about 1250 pages and is eminently practical. The text bristles with proofs that the author has had a large and varied practical experience upon which to draw for interesting material in the production before us. In chapter 1 the subject of inflammation receives its full share of attention, and is exhaustively treated. Tumors are fully discussed by Frederick S. Eva, with good illustrations. The subject of bandaging has been nicely illustrated. The proper amount of space has been allotted to fractures and dislocations, also diseases of bone and joints. Space will not allow me to give in detail the many interesting features of each chapter. The one on military surgery has been prepared by the editor, the character of which is something new and is quite an addition to the work. The illustrations and cuts under this head are quite interesting and striking, and to the point. It is stated in the preface that the subject of treatment has been made of primary importance, which after a careful reading, it is clearly shown that the treatment found here is very full and complete; also a very full and clear description of symptoms, pathology and prognosis is given. The various new operations practiced in modern surgery have been carefully described, and the difficulties and dangers attending their performance

valuable and practical guide to follow, well worthy the careful perusal of any surgeon, young or old. It is a fine specimen of book-makers art, beautifully illustrated, and the paper and mechanical work deserves a word of special commendation. The work cannot be too highly recommended.

A COMPEND OF SURGERY FOR STUDENTS AND PHYSICIANS. Including Minor Surgery and a complete section on Bandaging, by ORVILLE HORWITZ, B. S. M. D., Clinical Professor of Genito Urinary Surgery and Venereal Diseases Jefferson Medical College, Surgeon to Philadelphia Hospital, Fellow of the College of Physicians of Philadelphia, etc. Fifth edition, revised and enlarged. Philadelphia, P. B'akiston, Son & Co., No. 1012 Walnut Street, 1893.

The appearance of the fifth edition of this book is an evidence of its professional appreciation. It presents surgery in all its details in a very condensed and compact form. A complete chapter is devoted to bandaging, which is profusely illustrated, containing on the whole 167 illustrations. It also contains 98 formulæ selected from standard authorities and from those in use in the practice of the author. This book will be of special help to the student preparing for examination, giving him the essential points in very limited space. The author has been very careful in his work, and the volume will undoubtedly continue its reputation, proving very useful for the purposes for which it is intended.

In our review of the second edition of Martin's Essentials of Minor Surgery, in our last issue, we were not aware of the fact that a large number of the illustrations had been redrawn and enlarged and an entirely new set of bandaging cuts inserted; for these, as well as many of the descriptions, the author is indebted to the American Text Book of Surgery.

KEPRINTS.

A Study of Epilepsy; Some Interesting Reflex Measures, with Treatment and Comments. By J. J. Caldwell, 1138 N. Fulton Avenue, Baltimore.

Obstructions to the Functions of Micturition, and the Results. By R. L. Payne, Jr., Lexington, N. C.

A Consideration of the Paræstilutic Neuroses. By Joseph Collins, M. D., New York; Instructor of Nervous Diseases in the New York Post-Graduate Medical School; Neurologist to the Dewitt Dispensary; Physician to the Hospital for Nervous Diseases.

An Analysis of 125 Cases of Cholera. By Joseph Collins.

Sterility in Women, causes, treatment and illustrative cases; Microscopical Studies in Pelvic Peritonitis; Carcinoma on the Floor of the Pelvis, by Mary A. Dixon Jones, M. D., Brooklyn, N. Y.

Traumatic Deafness, by W. H. Bates, M. D., Assistant Surgeon New York Eye Infirmary.

A New Method of Direct Fixation of the Fragments in Compound and Ununited Fractures, by Nicholas Senn, M. D. PhD., LL.D., of Chicago, Professor of Practice of Surgery and of Clinical Surgery in Rush Medical College, Professor of Surgery in Chicago polyclinic, Attending Surgeon Presbyterian Hospital, Surgeon in Charge St. Joseph Hospital.

It does not often happen, because there is seldom so much generosity on one side, or so much conscientiousness on the other, that a physician returns a check for \$500 voluntarily tendered, on the ground that his services had not been worth so much money. This incident, we learn from the Medical News, occurred a few weeks ago in Philadelphia.

... with the functions of the intestines, checks the action of the uterus, and is in the way during ablution. For the first three days he limits diet to milk, bread and butter, rice, spinach, potatoes and fish. He forbids wine and coffee, and believes, with Zweifel, that errors in diet are among the chief causes of prominent abdomen. The patient is kept on her back for three days, but Windmuller holds that 10 days' rest in bed is sufficient. He has had no cases of prominent abdomen in any of his patients, even in multiparæ, with the exception of those who had grown fat. In the discussion, several experienced obstetricians differed as to whether prominent abdomen was due to deposit of fat in the parietes after labor, or to distension of the intestines which could be controlled by the binder. Many surgeons applied no bandage after abdominal section; but the physiological conditions were not the same as in the puerperium. Schrader and others believed that the binder did more good than harm; he laid great stress on diet in childbed as influencing the future form of the abdomen. All food liable to cause flatulence must be avoided; spinach and potatoes were particularly bad in this respect. When the pelvis was narrow, or its angle too acute, the chances of the abdomen becoming pendulous after labor were great. To counteract the evil, a good abdominal binder should be worn during the last months of pregnancy. In Japan it was customary for women to wear a binder during the entire second half of gestation. The binder in pregnancy supported the anterior walls, and greatly diminished the chances of parting of the recti.—*British Medical Journal*.

Dr. Robert Battey, of Rome, Ga., has presented his medical library to the State of Georgia upon the condition that it be placed in a separate alcove in the State Library at the State Capitol as a nucleus of a State Medical Library.

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EXCEEDINGLY VALUABLE IN CASES OF

Dyspepsia, Indigestion, Heartburn, Mal-Assimilation, Aperient and Cholagogue.

Highly recommended in all cases of disordered Digestion. Chemistry and Physiology prove that the digestive properties of Pepsin are developed only in an Acid medium. A solution of the same in Lime Juice (sweetened and flavored) therefore furnishes a very active and palatable preparation.

DOSE—The adult dose is from a dessertspoonful to a tablespoonful, to be taken immediately after eating. To CHILDREN, one-half to a teaspoonful may be given, according to age.

Price, 6-oz. Bottles, 50c; Pints, \$1.00

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A Too Common Affront to the Profession.

About a year since the Journal of the American Medical Association, in an editorial article, referred in unqualified language to the strained relations which it asserted were existing between physician and druggist; the salient cause being the habit of counter prescribing, coupled with the more vicious habit of substituting. Since then, if we may judge from the tone of the bulk of new literature being sent out, the substitution habit is shown to be the one great enemy overtopping all others, to successful medical practice.

We do not mean to assert that all pharmacists are given to the habit. On the contrary, we believe a large majority of them to be entirely free from and above suspicion. Still the fact remains that substitution is practiced to such an extent as to engender anxiety and timidity on the part of prescribing physicians.

Persistent effort at substitution is but a commendation of the genuine product sought to be imitated, and the practicing physician is quick to recognize the fact. And, once recognizing it, his confidence in the genuine is strengthened, while at the same time he is forced into the unpleasant attitude of maintaining a constant wariness over his prescriptions.

As fairly tipifying this condition we give below an extract from a letter from Dr. Bostick, of Galena, written October 24th, 1893, to the Antikamnia Chemical Co. This letter is, by the way, a fair prototype. He says:

"I became dissatisfied some time since with the action, or rather non-action, of what I supposed to be Antikamnia. I began to look into the matter and discovered the druggist had been substituting in my prescriptions. I then had him get me tablets which I felt quite sure he, with any appliances he had, could not imitate; since which time I have been entirely satisfied with its action. I am satisfied that much *stuff* is sold and palmed off as Antikamnia, much to the detriment of your article, which has proven so very satisfactory to me. In many cases where quinine is indicated, I cannot prescribe it on account of its action on the brain, unless with Antikamnia, which seems to remove the objectionable feature."

The foregoing will surely justify all practitioners, where they may have cause to suspect they are being subjected to any such

practices, in insisting upon the perfect integrity of everything they specify in their prescriptions. The doctor has the highest and best right to insist that no worthless substitute be imposed upon his defenseless patient. He knows the specific effect of the genuine drug and knows equally well it cannot be successfully imitated.—*Courier of Medicine, Nov. 1893.*

Phenacetine in Pneumonia and Typhoid Fever.

In a clinical report published by the N. E. Med. Mo., No. 4, 1893, Dr. H. F. Brownlee relates some interesting experiences, from which we make the following brief extracts :

"I have used Phenacetine in many cases of pneumonia where I think it unsafe to use Acetanilid and other antipyretics, and I have seen much advantage from its use. In pneumonia, Phenacetine exerts a quiet, soothing influence, making the patient comfortable. It reduces the temperature and opens the pores, thus relieving tension. If, at the onset of pneumonia one or two 15-grain doses of Phenacetine be administered, the severity of the attack is much lessened.

"In typhoid fever we want an antipyretic and analgesic, and in these cases nothing will take the place of Phenacetine. In one of my recent cases of typhoid fever the temperature ran very high, and the patient being of a nervous make-up, needed anodynes. Their use did not give satisfactory results. I then administered Phenacetine in 10-grain doses every three hours, with the most gratifying success. The temperature would go down one or two degrees with immediate relief. A dose in the evening insured a quiet, restful night.

"In other cases where the temperature runs very high, with a dry, hot skin, I order Phenacetine in regular 5-grain doses, every 3 or four hours, with marked advantage. I have used Acetanilid and Antipyrine in these cases, but their action is not as pleasant or as safe as that of Phenacetine."

I used Peacock's Bromides with success. In epileptic fits, especially one case of ten years' standing, in which I exhausted all remedies at my command, it has proven a valuable remedy, always positive and constant. I cheerfully recommend it to the medical profession.

HORACE C. GEORGE, A. M., M. D.

Combination of Drugs.

The *Elixir Six Aperiens*, consisting as it does in a palatable form, of Cascara Sagrada, Mayapple, Dandelion, Butternut, Alexandria Senna and Rochelle Salts, with aromatics, operates without some of the disadvantages were lesser number of the ingredients administered, proving that the united action of laxatives are often improved by combination. Every physician knows that the official Pil. Cathartic Co. consists of six purgatives which make popular cathartic. We know that calomel given alone acts feebly on the kidneys, but along with digitalis and squills it is the most powerful known diuretic. Take another instance. Ipecac and opium have each diaphoretic properties, but when combined it makes Dover's powder the, diaphoretic properties of which are increased more than four-fold, and in fever we all know the addition of aconite to the opium and ipecac still increases the remedial properties. We might go on illustrating the value of combinations, but certainly in no instance is it better exemplified than in the *Elixir Six Aperiens*, which acts on the entire alimentary canal, and is peculiarly adapted to children and pregnant women on account of its mildness, and will be found a specific in habitual constipation.

Sennine in Eczema and Venereal Ulcers.

Eureka Springs, Ark., October 9th, 1893.

Dios Chemical Co., St. Louis, Mo. :

Gentlemen—The sample of Sennine you sent me came safely to hand, and I happened to have some cases that visited my office daily for treatment. In two cases of eczema covering the inner side of thigh, I applied the Sennine just as I received it from you, that is, full strength, dry, and I am happy to say it acted like a charm in both cases. Again I applied Sennine to venereal ulcer and must say that it did all any one could ask. I look upon Sennine as the antiseptic of all others, and shall continue to use it in my practice.

W. R. HARDESTY, M. D.

The Phosphates of Iron, Soda, Lime and Potash, dissolved in an excess of Phosphoric Acid, is a valuable combination to prescribe in Nervous Exhaustion, General Debility, etc. Robinson's Phosphoric Elixir is an elegant solution of these chemicals.

Cheap Tooth Brushes Dangerous.

An operation for appendicitis upon a patient living in this State revealed the fact that the disorder was due to the presence of tooth brush bristles. "Cheap tooth brushes," remarked the Albany surgeon who had charge of the case, "are responsible for many obscure throat, stomach, and intestinal ailments. The bristles are only glued on, and come off by the half dozen when wet and brought in contact with the teeth."

This is a good argument to use at the counter in discouraging the sale of the cheap and, as the above item shows, dangerous tooth brushes with which the fancy goods trade is flooded. It were better for the user to pay fifteen or twenty cents more for a brush well made than to risk the dangers attending the use of the cheaper makeshift.—*American Druggist*.

"A wise man of fifty and a physician." We run across men almost daily who without any previous professional training have acquired useful knowledge containing physiological truths. The wisdom of medicine is like that of everything simple; pure common sense. Abraham Lincoln knew what would tend to longevity and every physician knew the wisdom of his proverbs :

"Do not worry.

"Eat three square meals a day.

"Say your prayers.

"Think of your wife.

"Be courteous to your creditors.

"Keep your digestion good.

"Steer clear of biliousness.

"Exercise.

"Go slow and easy.

"Maybe there are other things that your especial case requires to make you happy, but, my friend, these, I reckon, will give you a good lift."

The Chinese doctor's lot is not wholly a happy one. Four members of the Imperial College of Physicians at Peking failed recently to make a proper diagnosis of the Emperor's indisposition, and were punished by being fined a year's salary.

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Trade Mark.

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GENITO - URINARY DISEASES.

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SPECIALLY VALUABLE IN

Prostatic Troubles of Old Men—Pre-Senility,
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DOSE:—One teaspoonful four times a day.

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This new synthetic product, whose base is a coal tar derivative, possesses all the advantages of the most approved Anodyne, Nervine, Sedative, or Hypnotic, and can be used without danger of untoward after effects. Its most efficient action is fully set forth in a circular which we shall be pleased to send together with a sample of the product to any physician making application.

Detroit Pharmacal Co.,

Manufacturers and Jobbers of Physicians' Supplies,

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For sale by Burwell & Dunn, Charlotte, N. C.

Doctor, Have You

ever wished for an antiseptic equal in action to Iodoform, and free from its characteristic odor?

If So

we would be pleased to send you a sample of IATROL. It is

Superior to Iodoform

in action, and is absolutely odorless and non-toxic.

IATROL,

from the Greek, meaning to heal or dress a wound—is an Oxyloido-Menthyl-Analide, obtained by the action of Nascent Iodine upon one of the Aniline group.

Three times lighter

than the iodoform, the economy of its use as a dusting powder is evident.

Clinton Pharmaceutical Co., *Manufacturing Chemists,*
SYRACUSE, N. Y.

Another Abortion Scandal.

Our daily newspapers are again wallowing in the slough of abortion scandal, down on their bellies in the gutter of abortion filth, reveling in the nastiness of abortion pollution. The mangled body of an unfortunate young woman has been found, and the daily press, like sleuthhounds maddened by the scent of blood, are on the track of an abortionist. Misfortune and shame always have and always will occasionally overtake the purest of her sex. Abortionists will still pursue the deep damnation of their trade. A shameless press will continue to print, for pay, their impudent, disgusting, and lying advertisements—partners in crime. Our sympathies are with the community, whose daily press daily pollutes the eyes, ears, sense, conscience and morals of its people with the bloody, nauseating, degrading and demoralizing details of abortion defilement.—*Pacific Med. Journal*.

Nail-Biting Among Children.

Dr. Berillon finds that the habit of nail-biting among children is extremely common. In a public school in Paris out of 265 pupils examined during the month of April last, 63—that is to say, nearly one-fourth—were addicted to the practice. Curiously enough, results vary greatly in different districts and in different schools in the same district. It seems that girls are more given to the habit than boys. In one girls' school in the Department of Yonne, 11 out of 21 were confirmed nail-biters. In another girls' school the proportion was 61 out of 207 pupils, and, of those 61, 15 were found to be in the habit of biting the nails of both hands, and the others of biting only those of one hand. Mr. Berrillon recognizes that nervousness has much to do with the habit.—*N. Y. Medical Record*.

It is said that Bismarck once sent a challenge to Virchow because of some frank speaking on the part of the great pathologist. The latter instantly remarked that as the challenged party he had the choice of weapons, and held up two sausages apparently exactly alike, saying: "One of these is filled with deadly trichinæ, and the other is perfectly healthy. Let Bismarck choose which of these he will eat, and eat it, and I will eat the other." The duel was not fought.

Dr. Leo Egger, of Vienna, on American Manufacturing Pharmacy.

The eagerness of Americans in general to learn what Europeans think of our land and its institutions, and their excessive sensitiveness to the severe criticisms of some distinguished foreigners in the past—Charles Dickens, for example—have long been regarded as constituting an amusing foible in the national character. The all-exaggerating humorist has not failed to seize upon this trait, and to make all manner of fun of the enterprising journalists who send their reporters out in tugs to greet the arriving celebrity and ascertain his “impressions of America” ere he puts foot on our soil!

Certain it is that an unusual interest attaches to the comments of intelligent Europeans, if made with proper care after ample and adequate opportunity for observation, reflection and comparison. Such interest is not found wanting in a recent contribution to the *Pharmaceutische Post*, by Dr. Leo Egger, of Vienna, on the subject of American pharmacy in general, and notably the development of industrial pharmacy as typified in our most extensive manufactories. We quote briefly from Dr. Egger's report:

“It remains for me to speak briefly of individual manufacturing establishments. This journal has previously contained such detailed reports on Parke, Davis & Co., of Detroit, that I need add but a few words respecting the internal operation of these laboratories which stand alone in extent and perfection of equipment. The most outrageous pedant is forced to unqualified admiration when he sees the painstaking care and caution to ensure reliability, with which the colossal manufacturing operations are conducted, and with which every single pill, tablet, solution, and extract is made actually and absolutely to contain what is claimed on the label. This is achieved by a remarkable system of graduated responsibility within the entire corps of officials, each superior being held accountable for the errors of his subordinates, should the real culprit not be detected.

“A visit to this factory shows that operations on a manufacturing scale are conducted at no sacrifice whatever of the accuracy and caution characteristic of our craft—on the contrary, that the extensive production renders possible a perfection in the preparations which would be inconceivable in work of lesser magnitude.”

Quinine Topically.

Dr. Alföldi (Kozegeszegugyi-Kalaus) reports the following cases in which quinine was applied directly to wounds :

1. A severe contusion of the foot rendered amputation of the leg necessary. Several days after the operation, despite the most strict antiseptics, the lips of the wound and their surrounding tissues took on a blue discoloration, showed no tendency to healing, and the flaps grew cold. This condition grew more intense, and gangrene threatened.

Under the application of pledgets of cotton soaked in a one per cent solution of sulphate of quinine, the gangrenous tendency disappeared, the wound assumed a normal appearance and healed promptly.

2. A child aged 6, had what the author calls an "apple-sized" cavernous neoplasm on the right arm, which he destroyed with Vienna caustic. A week later the wound was gangrenous and the arm affected with extensive erysipelas. He washed the region with a one per cent. solution of quinine sulph. and dressed it with cotton and a gauze bandage soaked in the same solution. Under this treatment the wound became clean, showed red granulations, erysipelas disappeared and rapid healing supervened.

3. A row of soft chancres around the glans was dusted with powdered sulphate of quinine every second day. After renewing the dressing four times, the ulcers were found healed.

The author's experience causes him to believe that sluggish, infected wounds become clean and heal under quinine locally more rapidly than in consequence of the application of corrosive sublimate or iodoform, and that clean wounds heal with surprising rapidity under quinine.

The undersigned chairman of the American National Committee of the International Medical Congress, which was postponed from September 24th on account of cholera prevailing in Italy, has been notified by the Secretary-General that the Congress will be held at Rome from March 29th to April 5th, 1894. Instructions and documents relating to the journey, etc., are promised for the near future

Yours very respectfully, N. JACOB, M. D.

110 W. 34th Street, New York, Nov. 17, 1893.

Medicine and Surgery Among Animals.

Animals get rid of their parasites by using dust, mud, clay, etc. Those suffering from fever restrict their diet, keep quiet, seek dark and airy places, drink water, and sometimes plunge into it. When a dog has lost its appetite, it eats that species of grass known as dog's grass, which acts as an emetic and a purgative. Cats also eat grass. Sheep and cows, when ill, seek out certain herbs. An animal suffering from chronic rheumatism always keeps, as far as possible, in the sun. The warrior ants have regularly organized ambulances. Latrielle cut the antennæ of the ant, and other ants came and covered the wounded part with a transparent fluid secreted from their mouths. If a chimpanzee be wounded, it stops the bleeding by placing its hand on the wound, or dressing it with leaves and grass. When an animal has a wounded leg or arm hanging on, it completes the amputation by means of its teeth.

A dog, on being stung in the muzzle by a viper, was observed to plunge its head repeatedly for several days into running water. This animal eventually recovered. A sporting dog was run over by a carriage. During three weeks in winter it remained lying in a brook, where its food was taken to it. This animal recovered. A terrier hurt its right eye. It remained under a counter, avoiding light and heat, although it habitually kept close to the fire. It adopted a general treatment, rest and abstinence from food. The local treatment consisted in licking the upper surface of the paw, which it applied to the wounded eye, again licking the paw when it became dry.

Animals suffering from traumatic fever treat themselves by the continued application of cold water, which M. Delaunay considers to be more certain than any of the other methods. In view of these interesting facts, we are, he thinks forced to admit that hygiene and therapeutics as practiced by animals may, in the interest of psychology, be studied with advantage.—*Farm Folks.*

It affords me great pleasure in saying that I have had signal success with Cactina Pillets in various forms of heart disease, in alcoholism, excessive tobacco, more especially chewing. Cactina Pillets are invaluable. I shall continue to prescribe them.

THOS. W. WEBB, L. R. C. P., L. M.

33 O'Connell Str., Waterford, Ireland.

Physicians who have been disappointed in the use of favorite Prescriptions have the remedy in their own hands. Prescriptions and orders should read "Wm. S. M. Chem Co."

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CHARACTERISTICS:

UNIFORM STRENGTH, CONVENIENCE OF ADMINISTRATION, NON-LIABILITY TO DETERIORATION BY AGE, POSITIVE THERAPEUTIC EFFICACY.

The WM. S. MERRELL CHEMICAL CO. will not hold themselves responsible for the identity of Fluid Extracts, filled out by druggists from bulk stock, even though the written label may read "Merrell's." CAUTION.—Accept original packages only.

 Read our Monograph—"Green Drug Fluid Extracts: Their Origin, History and Rationale." Sent free to any address.

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produce symptoms closely resembling delirium tremens.
patients become delirious.
dangerous to human life.
have to be watched and not to be trusted.
retard convalescence.
should not be administered internally, however much they may have been dialyzed or purified.

Order and Prescribe  { ACID SALICYLIC—True—MERRELL.
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FLUID HYDRASTIS.

A solution of definite strength and reliability, representing all the valuable constituents of the drug—the offensive and irritating resins being rejected. The only perfect representative of the drug in the fluid form within reach of the medical profession. Though often attempted it has never been successfully imitated. Send for our pamphlet on "Hydrastis and its Preparations."

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DISEASES OF THE VAGINA AND UTERUS.

The most efficient and cleanly means of introducing remedies into the vagina. Antiseptic, perfectly soluble and reliable. Each capsule contains an absorbent tampon which may be medicated with any remedy indicated.

WHEN?

In all cases of acute and chronic inflammation of the lining of the womb, gonorrhoea syphilitic, purulent and leucorrhoeal discharges.

Relaxation of the uterine ligaments and weakening of the vaginal walls.

Falling of the womb. Ulceration of the os uteri.

Disease of the ovaries and fallopian tubes.

Painful and scanty menstruation.

Where the womb is extremely irritable and neuralgic.

HOW?

Moisten the tampon with the remedy, draw it back into the capsule by means of the linen thread, replace cap and insert.

WHAT?

The result is a grateful relief to the sufferer and satisfaction to the physician. No handling of disagreeable drugs; no loss of medication in the introduction, no soiling of linen.

THE VERDICT!!

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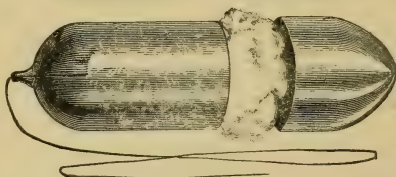
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Extract from a letter from Dr. A. J. Howe, Professor of Surgery, Eclectic Medical Institute, of Cincinnati, O.

"The Anderson's Vaginal Capsules charged with tampons of Oulo-Kutun are a convenient vehicle and medium for introducing douches or medicated fluids into the vagina, and retains them there. Astringent, sedative and antiseptic liquids may be thus employed, instead of the syringe as an implement, or a speculum."

Respectfully,

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Have you seen our "Ruby Capsule" for disguising the physical appearance of prescriptions, and for use when two medicines are to be taken in alternation? Send 10c. for trial box of 100.

Abstracts.

The Horseshoe on the Door.

Dr. T. O. Summers, of Waukesha, Wis., sends us the following :

I wonder where the patients are—

Why everything's so dull ;

'Twas just a month or so ago

I had my office full.

But now the bell I never hear,

And money's running low—

I tell you something must be done,

And that right soon, you know.

"I'll tell you what," the good wife said,

"You laugh at old folklore,

But patients stopped that day you took

The horseshoe from the door.

"And I am going to put it back ;

You'll see how quick they'll pour

Into your office when you put

That horseshoe on the door."

She put it back and then remarked,

"I told you so before,

And greater men than you believe

In horseshoes on the door."

Alas, for all the luck it brought !

Or patients did restore,

Next day upon my bald pate fell

That horseshoe from the door.

And while I groaned, and bitterly

At superstition swore,

She blandly said, "It brought a case—

That horseshoe on the door."

—*New York Medical Journal.*

The mystery of ice-cream poisoning is a reproach to the professions of medicine and chemistry. Year after year, with mournful reiteration, there are many reports of fatal cases. The deaths from this source must immensely exceed those from hydrophbia, but Pasteur institutes spring up like mushrooms in every country, whilst the deaths of the victims of poisoning by the cream are passed over in silence. Would it not be well to look into this matter? Would it not be well to prove or disprove the theory of Dr. Hull, that the common ice-cream freezer is often an electric battery decomposing toxic products by means of the mixture acting as an electrolyte?—*Medical News.*

Salol in Cystitis.

Arnold (Therap. Monatsch, May, 1892) relates cases of acute and chronic catarrh of the bladder which have been much benefited by the use of salol in gramme doses in addition to the local treatment. Even tuberculous cystitis has been relieved by it. Arnold observes that salol makes the urine acid, and renders it ultimately almost clear and free from smell; that the drug is well borne, even when administered for some length of time, and that it is a useful adjunct to the treatment, especially when only weak antiseptic solutions can be tolerated by the bladder.—*British Med. Journal*.

Dr. Schweningen, Bismarck's physician, although it has been claimed not rightly professional, has in one particular set an emulation—worthy example to certain members of the American medical profession. Kaiser Wilhelm II. ordered him to telegraph daily a detailed account of Bismarck's condition. Dr. Schweningen replied that his duty toward his patient rendered it impossible that he should comply, and that under no circumstances would he do so unless authorized by Bismarck and his family. He was attending Bismarck, not on behalf of the government, but in his private capacity as a physician. His position in the matter was, therefore, just as sacred as that of the priest when asked to reveal the secrets of the confessional. A very acrimonious correspondence ensued between Schweningen and the emperor's secretary, together with the emperor's principal physician. The professor daily expects to receive an intimation to the effect that his resignation as professor of the University of Berlin would be acceptable, and the chances are that the paranoic Kaiser will dismiss him summarily. The feeling of the profession will be decidedly with Dr. Schweningen, who moreover cannot fail to profit pecuniarily from such adherence to professional ethics.—*Exchange*.

The Journal of the Arkansas Medical Society says there are two infallible tests of the life of a medical society—"refreshments" and "annual election of officers." If these fail, neither stimulation, electricity, artificial respiration, or even the officialists' infallible resuscitator, dilating the sphincter ani, will revive them. The Little Rock Medical Society failed to respond to "refreshments."

Refined Tastes.

A rather pointed story is told of Senator Blackburn, of Kentucky, and the late Senator Beck, which we give without varnish.

Upon one occasion it was necessary to test some old Bourbon whiskey before shipping the Simon Pure to a fastidious customer. The anxious dealer bethought him of these two great men, who were universally admitted to be connoisseurs in the article, and begged their indulgence in the matter of tasting the liquor. Blackburn swallowed a sip, smacked his lips, looked a little critical, tried it again, and then said, "It is fair,—very fair,—but," again smacking his lips, "It seems to me I taste iron in it." The dealer looked discouraged.

Beck went through the same process of tasting and trying, at last exclaiming, "That's good,—very good,—but I think I detect a taste of leather."

The dealer's face fell. But, feeling sure he had a superior article, he investigated. After diligent search, he found a carpet-tack with a leather cap in the bottom of the cask.—*Harper's Magazine*.

The Electrical Horsewhip.

It seems doubtful whether objection can be brought against the latest form of horsewhip, which is constructed to give a slight electrical shock to the animal. The handle, which is made of celluloid, contains a small induction coil and battery, the circuit being closed by means of a spring push. The extremity of the whip consists of two small copper plates insulated from each other, each of which is provided with a tiny point. The plates are connected with induction coil by means of a couple of fine insulated wires. As a means of surprising a sluggish animal into doing his best work without infliction of physical pain the electrical horsewhip will by many be hailed with gladness.—*Hartford Times*.

Herpes Zoster.

Dr. Ohmann-Dumesnil, in a valuable article on herpes zoster in the Quarterly Atlas of Dermatology, recommends Peacock's Bromides as a nerve-sedative when the prodromic symptoms appear.

Burns.

A doctor who had the painful task of dressing some of the wounds caused by the late dreadful fire in the Cold Storage building in the World's Fair grounds, has this to say about the treatment of burns in general:

"Burns are always painful, but the most painful ones are not the most dangerous. A circumscribed deep burn is less dangerous than a superficial burn covering an extensive surface. The rule in burns and scalds is to exclude the air as soon as possible. This is generally more readily accomplished by wrapping the burned part with gauze or cotton soaked in oil. Cloths wrung out of a solution of 'baking soda' or boric acid are said to relieve the pain promptly. A dressing of flour can usually be obtained at once, and answers as a temporary dressing.

"The dressing should be allowed to remain on as long as possible. All blisters should be picked and their fluid contents allowed to escape. Burnt fingers should not be allowed to touch each other.

"In the treatment of burns the utmost cleanliness should be observed. Suppuration from burns is no more necessary than from any other wound. They should be dressed antiseptically. This can be easily accomplished by having the oil used, slightly carbolized. Carbolized or iodoform or bichloride gauze should be used.
—*Pacific Rec.*

The active medical properties of cod liver oil are found in four times the quantity in Codliver Glycerine that they are in the best Norwegian cod liver oil, because none but its active properties are taken in its manufacture. In other words a Teaspoonful of Codliver Glycerine (one dose) represents the active medical properties of two tablespoonful of the best Norwegian cod liver oil, or from four to six tablespoonfuls of any of the emulsions. The nauseating, indigestible and other deleterious properties that the oil and emulsions contain, are not found in Codliver Glycerine; besides it mixes readily with water or any prescription and is a strong digestive stimulant. The manufacturers of Codliver Glycerine have made it possible to give cod liver oil in constant and heroic doses, without nausea, or oppression of digestive organs. Any stomach will tolerate it.

Antimonium Tartaratum—Is actually recommended in phthisis.

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Non-Toxic, Non-Irritant, Non-Escharotic—Absolutely Safe, Agreeable and Convenient.

FORMULA.—LISTERINE is the essential antiseptic constituent of Thyme, Eucalyptus, Baptisia, Gaultheria and Mentha Arvensis, in combination. Each fluid drachm also contains two grains of refined and purified Benzo-boracic Acid.

DOSE.—Internally: One teaspoonful three or more times a day (as indicated), either full strength, or diluted, as necessary for varied conditions.

LISTERINE is a well-proven antiseptic agent—an antizymotic—especially useful in the management of catarrhal conditions of the mucous membrane, adapted to internal use and to make and maintain surgical cleanliness—sepsis—in the treatment of all parts of the human body, whether by spray, injection, irrigation, atomization, inhalation, or simple local application, and therefore characterized by its particular adaptability to the field of

PREVENTIVE MEDICINE—INDIVIDUAL PROPHYLAXIS.

LISTERINE destroys promptly all odors emanating from diseased gums and teeth, and will be found of great value when taken internally, in teaspoonful doses, to control the fermentative eruptions of dyspepsia, and to disinfect the mouth, throat and stomach. It is a perfect tooth and mouth wash,
INDISPENSABLE FOR THE DENTAL TOILET.

DISEASES OF THE URIC ACID DIATHESIS.

LAMBERT'S LITHIATED HYDRANGEA.

RENAL ALTERNATIVE—ANTI-LITHIC.

FORMULA.—Each fluid drachm of "LITHIATED HYDRANGEA" represents thirty grains FRESH HYDRANGEA and three grains of CHEMICALLY PURE Benzo-Salicylate of Lithia. Prepared by our improved process of osmosis, it is INVARIABLY of DEFINITE and UNIFORM therapeutic strength, and hence can be depended upon in clinical practice.

DOSE.—One or two teaspoonfuls four times a day (preferably between meals.)

Close clinical observation has caused Lambert's Lithiated Hydrangea to be regarded by physicians generally as a very valuable Kidney Alternative and Anti-lithic agent in the treatment of

Urinary Calculus, Gout, Rheumatism, Cystitis, Diabetes, Hæmaturia, Bright's Disease, Albuminuria, and Vesical Irritations Generally.

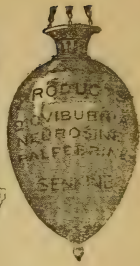
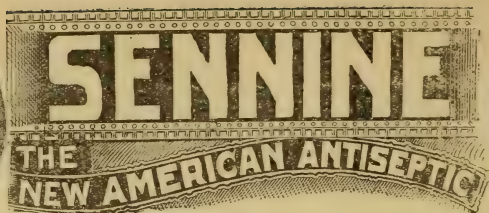
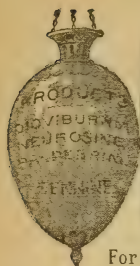
REALIZING that in many of the diseases in which LAMBERT'S LITHIATED HYDRANGEA has been found to possess great therapeutic value, it is of the highest importance that suitable diet be employed, we have had prepared for the convenience of physicians

DIETETIC NOTES.

suggesting the articles of food to be allowed or prohibited in several of these diseases. A book of these Dietetic Notes, each note perforated and convenient for the physician to detach and distribute to patients, supplied upon request, together with literature fully descriptive of LISTERINE and LAMBERT'S LITHIATED HYDRANGEA.

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Urethral Inflammations and Ovarian Pains.

Dr. I. N. Cohen, of La Crosse, Wis., writing, says: "I tried Sanmetto in a case of Miss M. B., a blonde, aged twenty-three years, who had been a sufferer for years with urethral inflammation and ovarian pains. I directed a teaspoonful three times a day, and instructed patient to report as soon as menstruation was over, which she did, saying that this was the first time in five years that she had passed through the menstrual period without the slightest sign of pain. I ordered her another bottle of Sanmetto with instructions to continue as before."

An Impartial Judgment of Homeopathy.

The following quotation from the *Wiener medicinische Presse*, 1893, No. 30 p. 1202, must certainly be admitted as a dispassionate and judicial statement of the position of homeopathy, written without heat or partisanship, but in a spirit of actual fairness and honesty:

"The 2d of July marked the fiftieth anniversary of the death of Samuel Hahnemann, the founder of the 'homeopathic method of treatment.' In an article dedicated to the memory of Hahnemann, by L. Buechner, the distinguished author of *Force and Matter*, after an acknowledgement of Hahnemann's intellectual ability, it is stated that homeopathy is a suitable method of treatment for rich, indolent, nervous, egotistic patients, or such as have a dread of medicines, whose ills, great or small, disappear spontaneously, without medical treatment or with any form of treatment, and with whom the imagination acts as an important adjunct to the processes of nature. Homeopathy will therefore probably never entirely disappear, and is not to be denied a certain amount of credit, partly positive, partly negative. The patient believes that he will be helped by homeopathic remedies, and is really helped—partly in consequence of belief and partly by awaiting the natural outcome of his ailment during the continuance of the homeopathic treatment.

"In the hands of unprofessional persons prescribing their own homeopathic remedies, or in the hands of uneducated quacks, the method is capable of much harm, which it has doubtless accomplished in innumerable instances."

This judgment may not apply to the self-styled homeopathist

who finds in sectarianism only a means to selfish ends. For him more drastic measures may be necessary; but if there be reputable men among so-called homeopathists, it is time for them to throw off their masks and repudiate a designation that among the discriminating has become a synonym for duplicity and false pretence.—*Medical News*.

Hard Times and Free Medicine.

From every part of this great and rich country the news comes to us of the extreme stringency in the financial position of our conferees, the greatest practitioners (Med. and Surg. Rep.). Never was there a richer opportunity for the masses to play the pauper than now. The present panicky state of the money market affords people an immense excuse for wholesale imposition on the profession. The conditions of the times will not give them free bread, free clothes, free transportation on the railroads, or rent free, but they hie away to many of our too numerous hospitals and dispensaries for free treatment—advice, medicine, and all included for nothing, or for “ten cents,” the figure fixed in certain palatial infirmaries.

The consequence of all this has been most demoralizing to the profession and the public. Practitioners reduced to a state of enforced idleness and grim want are forced either to quit their profession altogether, or to “meet steal with steel,” to open rival dispensaries, to advertise, or to drift into downright quackery.

Many cases have come to our knowledge which go to prove that the practice in vogue in many of our largest dispensaries is a species of downright robbery, and tends to work incalculable harm to the profession. Case after case is taken from among people of ample means and turned over to the hospital or to the college professor for his clinic, without a word being asked as to their mendicity or ability to pay anything at all. Cheap railroad excursion rates drain the outlying villages for miles in every direction.

This hydra-headed monster of indiscriminate free treatment must be seized and strangled, or we will soon see the profession of medicine dragged in the dust; open downright quackery will be rampant, and integrity and honor in the healing art will be things of the past.

By no means let us withhold our services to the poor and deserving, for humanity compels us to gratuitously attend these without means. Nor let us strip the field of such clinical material as

legitimately belongs to the teacher, but let the teacher not forget that he has no proscriptive right to filch from the struggling practitioner what justly belongs to him.—*Review.*

The Oldest Prescription in the World.

In the course of a deeply interesting lecture, delivered by Professor A. Macalischer, M.A., M.D., F.R.S. (Professor of Anatomy, Cambridge), at Firth College, Sheffield, on "Studies in Ancient Egyptian Literature," some of the earliest medical writings were referred to and explained and translated by the Professor (National Druggist). Photographs of soiled and seared papyri, together with the photographs of the mummified monarchs and magicians who wrote them, were depicted on the screen. Among the earliest prescriptions shown by the Professor was one for a "hair wash" for "promoting the growth of hair," for the mother of King Chata, second king of the first Dynasty, who reigned about 4,000 B. C. It is as follows :

Pad of a dog's foot,	.	.	.	.	1 part.
Fruit of date palm,	.	.	.	.	1 part.
Ass's hoof,	.	.	.	.	1 part.

Boil together in oil in saucepan.

Directions for use : Rub thoroughly in.—*Medical Review.*

College President—(sternly to misguided youth)—"I hear you have a cask of wine in your room ?"

Youth—"Yes, but the doctor ordered me to take wine for strength, sir."

College President—(less sternly)—"And are you growing stronger ?"

Youth—"Yes, I know I am, for when the cask was first brought I could scarcely lift it, and now I can carry it about with great ease."—*Pharm. Era.*

The New York Medical Journal says "the successful practice of medicine demands either the highest qualifications both moral and intellectual, or the most cunning and astute knavery. The latter does not, of course, lead to true success, but it fills an extensive field, and that seems to afford great satisfaction to its patrons. The confidence man in medicine finds a sphere for the exercise of his talents that is unsurpassed."

Antiseptics--The Old and the New.

Scene—A hospital not five miles distant from the New City Hall, San Francisco.

Dramatis Personæ.—Operating Surgeon, rigidly antiseptic. Sterilized nurses and assistants. Patient purified according to most recent method. Operation, abdominal incision and exploration. Old School Surgeon, as invited guest, whose ideas of antiseptic methods are more general than definite.

Operation proceeding, Operating Surgeon discovers an interesting condition of affairs.

O. S. Surgeon—Waxes enthusiastic, and his index finger bends for action.

Op. Surgeon—"Doctor, wash your hands before you touch the patient!"

O. S. Surgeon, triumphant—"Doctor, I washed my hands before you were up this morning."—*Exchange.*

Awarded Seven Highest Awards for Their Products.

The Columbian Exposition has just granted seven highest awards to the H. K. Mulford Company, of Philadelphia, two of which were medals, only one medal being in each class of exhibits. The medals were for the superiority of their pharmaceutical goods as a class, and for the best machine for manufacturing tablets, triturates, lozenges, etc. The other awards were Diplomas, the highest in their respective classes, for their tablets, triturates, lozenges and soluble hypodermics, medicine cases, tampons, digestive malt extract and their machine for manufacturing camphor cakes and other bulky pharmaceutical products."

Contagion from Kissing.

A telegram from Jamestown, N. Y., says that at a wedding in a village near that place a number of friends kissed the bride, who was suffering from slight sore throat at the time. Since the wedding the case has been found to be one of diphtheria, and a large number of those who embraced the bride when offering their congratulations have been attacked by the disease. No deaths have yet occurred, but many of the cases are said to be very serious.—*N. Y. Medical Record.*



ANODYNIA.



Antipyretic.

Analgesic.

Anodyne.

A superior agent in the treatment of Neuralgia, Neuralgic Headache, Myalgia.
Difficult Menstruation, etc.

A safe and efficient Antipyretic, void of unpleasant after-effects.

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One ounce package Anodynia,	-	-	-	30 cents.
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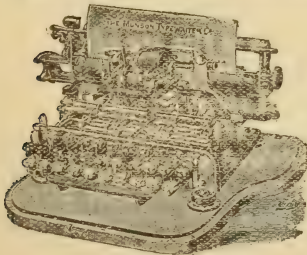
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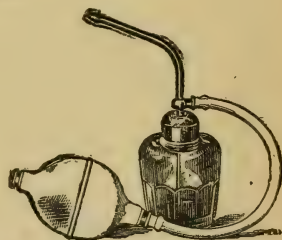
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is situated on the west side of Farragut Square, at the junction of 17th and K streets and Connecticut Avenue—the most beautiful and healthful part of Washington. Number of patients limited to seventeen. All rooms face the street and have open fire-places and electric bells. Marble operating and bath rooms with latest and best equipment. No pregnant, contagious, or insane cases received. Each patient has a room to herself. A small ward has also been fitted up containing three beds where surgical cases are received at one third the usual rates when necessary. Nurses trained by Dr. Johnson are in attendance.

For further information address 1728 K Street.

Miscellaneous.

The Doctor's Reward.

The Doctor sat in his room one night,
Dejected, worn and sad;
His rounds had not been overbright,
And business had been bad.
Some puzzling cases taxed his brain,
His wits were sorely tried;
He managed just his bread to gain,
But little else beside.

His practice barely kept his home,
His troubles broke his rest,
Dread poverty seemed all his doom,
Although he strove his best.
He ne'er refused t'attend a call,
Regardless of his due;
"I'll do my best, and that is all
The best of all can do."

The night bell rang, he quickly ran,
A boy stood there, aghast—
Some ruffian had just stabbed a man,
And he was dying fast;
The bleeding soon must lay him low—
There was no time to spare;"

The Doctor deftly stayed the flow,
And tied the artery there.

So the man was saved thro' the Doctor's skill,
As happens every day,
So, when he claimed his modest bill,
Cold thanks were all his pay.
And the Doctor started home once more,
With a face more brave and bright;
"I came out poor, and I go home poor,
But I've saved a life to-night."

The Age of Maturity.

Statistics are said to show that young men do not, on the average, attain full physical maturity until they arrive at the age of twenty-eight years. Professor Scheiller, of Harvard, asserts, as the result of his observations, that young men do not attain to the full measure of their mental faculties before twenty-five years of age. A shrewd observer has said that "most men are boys until they are thirty, and little boys until they are twenty-five;" and this accords with the standard of manhood which was fixed at thirty among the ancient Hebrews and other races.—*N. Y. Medical Record.*

The Largest Pharmacy in the World.

According to the Chemist and Druggist, July 29th, the pharmacy of Karl J. Ferrein, of Moscow, is the largest in the world, and puts up daily more prescriptions than any other. As many as twelve hundred prescriptions are put up in a day. The dispensing is done in a glass-domed room where twenty-four or more apothecaries are employed, and a clerical and apprentice force nearly as numerous gives a portion of its time to the reception, entering, and delivery of goods ordered and prepared. If poisonous ingredients enter into the composition of a medicine to be prepared, the checking of weights is done by a weigher specially appointed for that purpose. The *coctorium* has its walls and floor and fittings, as far as possible, made of white marble, and every attention is paid to keeping it scrupulously clean. The lighting is done by electricity. In all, two hundred and ninety-three men and boys find employment in the retail and wholesale departments of the establishment. The average number of prescriptions is not far from three hundred thousand annually, and the average amount of money received for their dispensing is three hundred and sixty thousand roubles. It is alleged by the Pharmaceutische Post that this gigantic business is founded on a reputation earned by Mr. Ferrein for purity of his drugs and for absolute accuracy in dispensing. The founder died in 1887, but his two sons perpetuate their father's name and methods of business.

Castration for rape is not a new proposition, but in view of the horrible prevalence of lynch-law in certain parts of the United States, it becomes a question if the procedure should not be given the sanction of good law-courts as well as that of the court presided over by the ferocious Judge Lynch. In such a suggestion there is no attempt to "make the punishment fit the crime," but for heinous sexual crimes castration would appear appropriate and logical. There is, however, a class of criminals, that will possibly be made more vindictive by any punishment, and especially by this form of it, and harbor a revenge perhaps more ineradicable than before against society. Then, too, a criminal thus punished has only to move to a part of the country where he is not known to escape knowledge of his mutilation. But, after all, the plan seems worthy of a trial.—*Medical News.*

The Servant was Horrified.

Dr. S. had last winter a newly arrived Hibernian for a servant; he had also recently purchased a pair of porpoise-leather boots. His wife, attracted by the novelty of the new foot-wear, asked the doctor in the presence of the servant what they were made of, to which he responded "Porpise-hide."

Shortly after the lady from the Emerald Isle interviewed Mrs. S., and announced her intention of "laving whin me week is up." Mrs. S., somewhat surprised, asked the disturbed domestic the reason for her announced departure, to which Bridget responded, with a horrified air,—

"Yer husband is a docthers, mum, an' I've heard them docthers do the cuttin' up people, an' didn't I hear him um, wid me own ears, say that the boots of him were made of pauper's hide? It's me own ould father that died in the poor house, an' I wouldn't be sarvin' a haethen that uses the skin of the poor to cover his dirty feet wid."—*Boston Commercial Bulletin*.

An Accidental Death from Ammonia.

At New Brunswick, New Jersey, an unusual cause of death has been announced as the result of the careless administration of aqua ammoniæ to a person in a fainting condition. A bottle containing several ounces of the drug was held to the patient's nose in such a way that the liquid was spilled. Some of it found its way into the throat and air passages. The throat and lungs were profoundly irritated by the ammonia, and the woman died in great pain. She had only recently recovered from an attack of pneumonia.

A man was being wheeled away with the dead, at the time of an epidemic. The victim suddenly raised his head and demanded of the man who was taking him along the street, where he was taking him to? "To the dead house," was the reply. "But I am not dead," said the poor man. "O, you be quiet," said the man who was pushing him along, "I guess the doctor knows more about this than you do, and he says you are dead."—*Popular Medical Monthly*.

The highest awards and medals at the World's Fair, were given to Reed & Carnrick's Infant Foods and Kumysgen.

Craniectomy.

Likewise the furor for Craniectomy is subsiding. In a majority of instances the operation is irrational and ineffectual, the operator losing sight of the fact that disease of the brain, arresting its development, is the cause of thickening or other manifestations of want of development of the cranium. Removal of the bony framework can have no possible good effect on brain massed, atrophied, or sclerosed by previous disease.

Hiccough and Hereditary Syphilis.

According to the Carini (*Internation. klin. Rundschau, Union Medicale*) hiccough in the new-born is to be regarded as a symptom of hereditary syphilis. It is of rather common occurrence, and is one of the earliest signs of the disease, coming on during the first few hours or days after birth, sometimes before the coryza. It lasts two or three weeks. The author's views are supported by numerous cases and by the effect of anti-syphilitic treatment on the hiccough.—*Clinique*.

Appendicitis.

Our friends the surgeons, puffed up with their marvelous success, desiring new worlds to conquer, have attempted to wrest from the practitioner nearly every region of the body. They have attempted to classify all the affections about the cecum as appendicitis, claiming it as a surgical affection. The pendulum is swinging back, and a more conservative view will prevail. The majority of these cases can be managed by the practitioner, though in a proportion of cases surgical interference is absolutely necessary.

Dr. Graily Hewitt, of London, one of the best known medical men of his time, is dead at the age of sixty-five years. He was professor of obstetric medicine in the university, and obstetric physician to University Hospital, London. He was a voluminous writer, a teacher of great fame, and, altogether, one of the most genial and lovable characters that Great Britain has lately produced in the field of medicine. His loss will be seriously felt not only in the immediate locality of his work, but throughout all the world of obstetric and gynecological medicine.

Medical Students and Medical Colleges.

By this time, all our medical colleges, in this country, with few exceptions are in full blast. From what we can gather, the attendance in the principal schools of our great teaching centres, is very much smaller than it has been for years.

New York, Pennsylvania, and other States have enacted laws, which must needs greatly reduce the number of students coming from neighboring States.

If there is anything that one abhors in this world next to being repeatedly dunned for a bill, it is examination. Now, in New York or Pennsylvania, before one is fully equipped to practice, he must put up stamps, for ten examinations. When he faces homeward or seeks a new field, he must stand two or three more. He must go through another State ordeal; and then, before he will be admitted into his State society he must go through another before the censors. So that, by the time he is ready to hang out his shingle, he is a pretty well examined man, and his funds have run low. Ambitious and enterprising young practitioners, have taken advantage of this condition of affairs and opened new schools, in the younger states; and, are keeping the students at home.

Another cause, perhaps, has been the hard times, the great difficulty "in making both ends meet" in practice; besides, the general raise in students' fees and greatly lengthened terms. Probably, the most salutary move has been raising the standard, of preliminary education.

We have been repeatedly requested to advise, which city and which particular school is the best.

We must answer in reply, that with few exceptions, all our regular schools now, maintain a reputable standing; but, we wish to warn the novice that no school can make him. He must lay the foundation of his medical household with his own efforts. The professor is like a guide-post, to show the way, he will teach. The student must grope along, over the quagmires of complex and intricate problems by his own efforts; as, he alone can learn.

We may say to him, that while the profession of medicine is an exacting mistress she is a just and generous one, who will reasonably provide for the wants of him who is her patient, zealous, and industrious votary.—*Times and Register*.

Doctors' Fees in England.

English fees have lately been ventilated in the London High Court of Justice (Med. Stand.). Dr. Keetley, Senior Surgeon of the West London Hospital, sued Prof. Banister Fletcher for \$2,000 for attendance upon the latter's son, who was badly hurt in the terrible railway disaster at Burgos some time ago. Prof. Fletcher paid \$500 into court, declaring that to be an adequate payment for the services rendered. Dr. Keetley testified that he thought \$150 a day a fair remuneration for his undivided attention, even for a day's work in London. He received \$75 a day whenever he attended court for an insurance company with which he was connected professionally. Dr. Alfred Cooper testified that, in his opinion, the charges were moderate in the extreme. For himself he should charge \$2,000 for a trip to Paris, and \$150 or \$200 a day while he remained there. For going to Burgos he should charge \$5,000. For bringing a patient home from Burgos and taking care of him during a three days' journey he should charge \$2,500. For devoting his whole time to a patient in London he should not consider \$40 an hour an excessive charge. Other surgeons gave similar testimony, and finally the jury decided that Mr. Keetley was entitled to \$1,750, a verdict that gave him a substantial victory.

"Coca" has maintained its reputation as a powerful nerve stimulant, being used with good results in nervous debility, opium and alcohol habit, etc. The highly variable character of the commercial drug makes it uncertain however. Robinson's Wine Coca (see adver) we believe to be a uniformly active article, it being prepared from assayed leaves, the percentage of Cocaine being always determined by careful assay.

Too many professors and lecturers in teaching their own particular branch of medicine give information that is never thought of again. The true method of instructing in medicine, as in other sciences, is to call from time to time the facts that have been previously stated, thus strengthening the memory and testing the value of the method employed in teaching.—*Ex.*

For an "all-round" alterative and a thoroughly tried tonic commend us to the Elixir of Three Chlorides, Renz & Henry, originators and makers, of Louisville.

Highland Water

From LEWISTON, MAINE.

Is the Best Tonic, Diuretic, Eliminative and Solvent of Uric Acid.

1. Because it is the softest and purest water known, containing no excess of mineral salts and no lime or organic impurities, being therefore non-irritating to the digestive organs and kidneys.

Dr. G. THIN (British Medical Journal, vol. ii, 1891, page 91) states that the consumption of water containing lime brings about the development of gouty conditions; no doubt it acts in the same way as the contamination of the water by lead.

2. Because it contains Iron in combination with the alkalies, Sodium and Potassium in small quantities, as recommended by Profs. Flint, Thomson, Draper and others.
3. Because it comes from a region free from malarial germs.
4. Because all its mineral salts, and five of them in the exact form given in its analysis, are found in the human blood, of which they form a most essential part.

Analysis.—Each gallon contains:

Carbonate of Iron	1,100 grs.
Oxide of Iron	0,310 "
Chloride of Sodium	1,000 "
Sulphate of Soda and Potash	0,310 "
Carbonate of Soda and Potash	0,831 "
Carbonate of Magnesia	1,230 "
	4,781 "

HIGHLAND WATER is sold in glass only, and every bottle has our registered trade mark (two crossed arrows) on both cork and label. It may be obtained from Grocers and Druggists generally, or from the

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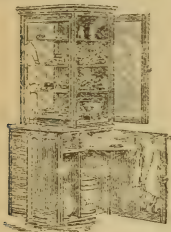
(Antipyretic and Analgesic) is useful in Neuralgia, Typhoid Fever, La Grippe, Sciatica, Acute Rheumatism, Hemiplegia and allied affections. It reduces Temperature and relieves pain, without subsequent ill effects. Price per ounce, 25 cts.; per 100 tablets (5 gr.) 50 cts. Samples of above sent on application to

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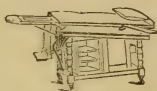


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Any position desired can
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The numerous positions obtainable and the ease with which it can be adjusted from one position to another commends it once, and it never fails to please.

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Buy 150 dozen pairs of one kind of socks from us every year. These socks are made in Germany by the finest stocking maker in the world. They are made of the finest long staple cotton, soft and fine gauge, they resemble silk. They have double toes and high spliced heels and are the best fitting, most comfortable and best wearing socks on the market.

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YOU PAY 50 CENTS AND NOT GET AS GOOD.

ROGERS & COMPANY,

Everything in Clothing, Hats and Furnishings,

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Please Mention Charlotte Medical Journal.

Medicines in the Days of Queen Mary.

Not many remedies of Queen Mary's time retain a place in the modern pharmacopœia. Cardano recommended bark of Indian wood, cinnamon, caryophyllum, colocynth, camphor, cyclamen, viola, turpentine, hops, anise, senna, poppy, mustard, myrrh, wormwood, agrimony, lichen, privet, rue, raisins, hyssop, crocus, marjoram, scabious, figs, honey, and many more; and he earnestly urges the use of a remedy which he had tried himself for breathlessness accompanied by bad cough: 'Take the lungs of a fox and forthwith wash them with wine and dry it in a furnace to a cinder; powder, and mix well with the yolk of an egg. Among his external remedies, one which was evidently a prime favorite, was that which he applied over the sutures of the skull, and especially the coronal, and which he found a grand remedy for bringing away the humors of the brain. It was composed of Greek pitch and ship's tar, white mustard, euphorbium, and honey, sharpened, if necessary, by the addition of blister fly. He had unbounded faith in the efficacy of elaterium—two grains dissolved in four ounces of goat's or cow's milk and as much water, this to be drawn through the nostril when the patient was fasting. He had found that when this remedy was used a very copious discharge of humor took place from the nostrils.—*Blackwood's Magazine*.

The enterprising and old reliable house of Sharp & Dohme, which has been established for nearly a century in Baltimore, have issued a price list of chemical and pharmaceutical preparations manufactured by them, which is more nearly in the nature of a mine of information than is the stereotyped price list. Every physician should secure one of them, as it will unquestionably be of great value to him.

In the eyes of the public, the medical profession stands next in rank to the clerical profession. This is the high estimate that the profession has won from intelligent people, and how well merited it is, need not be said. Strive to maintain this opinion; to elevate its tone. Be jealous of your profession's standing, and in making the effort you will unconsciously, but none the less certainly, elevate your own standing and improve your own mental powers.—*Ex.*

Tongaline.

This thoroughly scientific preparation has been before the public long enough to meet with the unqualified endorsement of the profession, by examining the formula, physicians will see that the combination is such as to fulfill all the indications of treatment in the diseases for which it is recommended. See ad, and send orders to Mellier Drug Co., St. Louis.

If the country were suffering from the want of physicians, if their ratio was out of proportion to the population, there might be some excuse for the hasty and imperfect preparation of the student, this crowding of our medical colleges with those in a hurry for diplomas, these aspirants for fame that are turned loose all too soon on a confiding and unsuspecting public. As it is, there is no excuse.—*Ex.*

Study the physician who succeeds. Learn, if possible, the secret of his success—whether it be his medical skill or his sympathy for the suffering. Discover, if possible, what gives him his success, and strive to learn from him the road to the goal you seek. Perhaps you will not find it so much pills and powders, as the comfort and consolation that he gives in the hour of suffering. I say, perhaps. At all events, it will pay you to study his methods.—*Ex.*

Too many students graduate and commence the practice of medicine without ever having witnessed a well-conducted autopsy, without ever having examined a pathological specimen under the microscope. They have listened to lectures as long as the moral law—have learned the dimensions of every cell in existence—but with it all, they have failed to secure a proper appreciation of the facts taught them, and are as ignorant of the practice of medicine as could be imagined.—*Ex.*

Physician (to shivering patient): "If you'd follow my prescription you'd have been warm in less than no time."

Patient: "I know it, for I threw your prescription into the fire."
—*Pharm Era.*

Reed & Carnrick received the highest awards and metals at the World's Fair, Chicago, for Carnrick's Lacto-Preparata, Carnrick's Soluble Food, Kumysgen and Parncrobin.

Tritica ^{S & H} AND SH

OCTOR, IS IT NOT SO?

"No class of ailments are so annoying and difficult to reach, and yet so prevalent as those affecting the urinary organs. This is especially true of many men of middle age, and more so among those of sedentary habits."

"There is not a physician with even a moderate practice who has not at least one or more cases of Cystitis, Urethritis or some allied trouble."

"The remedies that have been popular for many years, such as Buchu, Uvi Ursi, Juniper, Cubebs, Acetate of Potassium, etc., do not prove curative, but only either temporarily alleviate or render no relief at all."

That you may relieve this large class of sufferers, we offer you Tritica, which you will find gives prompt relief in retention of urine, is unequalled in Pyelitis, Cystitis, Urethritis, and all excesses of the mucous tissues.

If you have not tried this remedy, we should be pleased to send you a sample for trial.

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CHICAGO.

Gray's Glycerine Tonic Comp.

Formula Dr. JOHN P. GRAY.

Each Fluid half ounce contains :

Glycerine..... 80 minims	Gentian Root..... 10 grains	Phos. Acid Dil..... 12 minims
Sherry Wine 80 minims	Ext. Taraxacum..... 15 grains	Carminatives : q. s.

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To put it mildly, Homœopathy contains many therapeutical truths that could be employed with wonderful advantage by physicians, regardless of school. And these truths, and the medicines prepared by the American Homœopathic Pharmacopœia, are being employed by physicians outside of the Homœopathic lines in steadily increasing numbers every year. *This we know to be a fact.*

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Should any one wish to employ the remedies—and whatever may be said against Homœopathic practice, every one admits the Homœopathic pharmacy is wonderfully *clean* and its medicine usually pure and accurate—a request for our Physicians' Price List will be answered by a free copy.

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Unprejudiced Advice.

A Western Senator tells a story of a man travelling in a parlor-car between Omaha and Denver who fell asleep and, as Punch would say, "snored profusely from the nose," so that everyone in the coach was seriously annoyed. Presently, says the St. Paul Dispatch, an old gentleman approached the sleeper, and, shaking him, brought him out of his slumber with a start.

"What's the matter?" he exclaimed.

"Why, your snoring is annoying everyone in the car," said the old gentleman kindly.

"How do you know I'm snoring?"

"Why, we can't help but hear it."

"Well, don't believe all you hear," replied the stranger, and went to sleep again.—*Lippincotts.*

A story is told of a woman on the witness stand in a French court. She was asked her age, and answered that she was thirty years old.

"But" said the magistrate, did you not tell me you were thirty when you appeared before me two years ago?"

"I think it very likely," she replied, smilingly acknowledging her falsehood, and not at all abashed "I am not one of these women who say one thing to-day and another thing to-morrow.

Pruritus Ani and Vulvæ.

R Sodii hyposulphis..... ʒj.
 Acid. Carbolic ʒss.
 Glycerinæ..... ʒj.
 Listerinæ ʒiij.

M.

Sig. Apply externally as directed.

Obesity.

R Phytoline (Walker)..... f ʒj.
 Tinct. digitalis..... ʒj.
 Fl. ext. fuscus vesiculosus..... f ʒj.

M.

Sig. Twenty drops before and after the three daily meals.

The Elixirs manufactured by the Walke-Green Phar. Co. are unexcelled for clinical efficiency and palatability, and are worthy a trial by every physician.

For Dyspepsia and Nervousness Use Horseford's Acid Phosphate.

Dr. Geo. H. Knapp, St. Louis, Mo., says: "I find it an excellent preparation in dyspepsia and nervous disorders, such as mental exhaustion, wakefulness, etc. Several of my patients keep it in their houses all the time, and use it."

Dyspepsia.

R Glycozone f 3j.
 Tinct. gentian. comp. f 3j.
 Liq. pepsin f 3iij.
 M.
 Sig. Teaspoonful after each meal.

Typhoid Fever.

R Antikamnia 3j.
 Sennine 3ss.
 Sacchar. alb 3j.
 M. F. pulv. Divide in dos. No. 12.
 Sig. One powder three times daily.

Tuberculosis.

R Creosote drops v.
 Cod-Liver Glycerine f 3vj.
 M.
 Sig. Tablespoonful three times a day.

Pernicious Anemia.

R Elixir Six Iodides (Walker-Green's.)
 Sig. Teaspoonful three or more times a day.

Rheumatic Gout.

R Henry's Tri-iodides.
 Sig. Teaspoonful three or more times a day.

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Doctor (absentmindedly): "Your bill will be two hundred dollars."

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and those whose Health has been
Impaired through Age, Dis-
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Overwork.

This preparation is made from the clear fibre of selected beef, and is distinguished from the various substances used as food in the sick room, in being easily retained, and immediately absorbed without imposing any task upon the stomach, however delicate.

That is to say, beef extracts, beef juice, broths, &c., all have to be acted upon by the stomach before they can be absorbed, while this being already digested, passes immediately into the circulation.

Its great sustaining power makes it invaluable in all conditions of low vitality.

It should be given in all cases of exhaustion, from whatever cause, and will be found of great benefit in debility, nervous prostration, mental languor from overwork, &c.

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Therapeutic Properties.

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{ An Oxy-Iodo-Methylo-Analide.

{ An impalpable white powder, anaesthetic, slightly astringent, and of acid taste, unaffected by light or heat; will not decompose under action of metallic oxides, salts of mercury or alkalies.

{ Aseptic, antiseptic, germicide and a powerful cicatrizing.

Sample sent free of charge to physicians on application.

We also prepare Iatrol Moist Gauze 10 per cent., in yard and five yard jars.

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Dr. Chas. Gatchell, of Chicago, in his "*Treatment of Cholera*," says: "As it is known that the cholera microbe does not flourish in acid solutions, it would be well to slightly acidulate the drinking water. This may be done by adding to each glass of water half a teaspoonful of Rosford's Acid Phosphate. This will not only render the water of an acid reaction, but also render boiled water more agreeable to the taste. It may be sweetened if desired. The Acid Phosphate, taken as recommended, will also tend to invigorate the system and correct debility, thus giving increased power of resistance to disease. It is the acid of the system, a product of the gastric functions, and hence, will not create that disturbance liable to follow the use of mineral acids."

Send for descriptive circular. Physicians who wish to test it will be furnished, upon application, with a sample, by mail, or a full size bottle without expense, except express charges.

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Fig. 1.

—M
—L
—K

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DIRECTIONS FOR MEASUREMENT.

Give exact circumference of body at K, L, M.

PRICE TO PHYSICIANS:

SILK ELASTIC, \$2.75. THREAD ELASTIC, \$2.00.



Fig. 4.

It is indispensable for women during pregnancy and after confinement, as it prevents those bearing down pains which are experienced during gestation. Goods sent by mail upon receipt of price, or by Express C.O.D. charges for returning money added.

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R Katharmon,
Aquæ rosæ..... aa f ̄j.
M.
Sig. Apply several times daily.

Chaneroid.

R Sennine,
Subnitrate of bismuth aa ̄ss.
M.
Sig. Dust on sore and cover with dry lint.

Deviation des Regles. (Disordered Menstruation.)

R Dioviurnia..... f ̄vj.
Sig. Dessertspoonful three times a day.

THOMPSON'S MALTED BEEF.

(Name Registered.)

Extract of Beef. It will be found valuable in cases of Mal-nutrition, Dyspepsia, Wasting and debilitating ailments from convalescence, &c. Also THOMPSON'S MALTED HOP TONIC, a pure extract of Malt and Hops; a perfect Tonic.

A perfect Liquid Food and Nutritive Tonic, made by a combination of Superior Extract of Malt and Hops with peptonized cases of Mal-nutrition, Dyspepsia, Wasting and debilitating ailments from convalescence, &c. Also THOMPSON'S MALTED HOP TONIC, a pure extract of Malt and Hops; a perfect Tonic.
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A sample bottle of each or either preparation will be sent to any Physician by payment. Express charges only. Mention this paper.

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TISSUE PHOSPHATE.**

Wheeler's Compound Elixir of Phosphates and Calisaya. A nerve food and nutritive tonic for the treatment of Consumption, Bronchitis, Scrofula and all forms of Nervous Debility. This elegant preparation combines in an agreeable Aromatic Cordial, acceptable to the most irritable conditions of the stomach: Say Bone Lime Phosphate, Soda Phosphate, Iron Phosphate, Phosphoric Acid, and the active Principles of Calisaya and Wild Cherry.

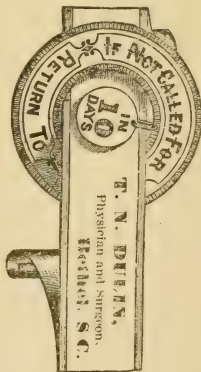
The special indication of this combination of Phosphates in Spinal Affections, Caries, Necrosis, Ununited Fractures, Marasmus, Poorly Developed Children, Retarded Dentition, Alcohol, Opium, Tobacco Habits, Gestation and Lactation, to promote Development, etc., and as a physiological restorative in Sexual Debility, and all used-up conditions of the Nervous System, should receive the careful attention of good therapeutists.

NOTABLE PROPERTIES: As reliable in Dyspepsia as Quinine in Ague. Secures the largest percentage of benefit in Consumption and all Wasting Diseases, by determining the perfect digestion and assimilation of food. When using it, Cod Liver Oil may be taken without repugnance. It renders success possible in treating chronic diseases of Women and Children, who take it with pleasure for prolonged periods, a factor essential to maintain the good will of the patient. Being a Tissue Constructive, it is the best general utility compound for tonic restorative purposes we have, no mischievous effects resulting from exhibiting it in any possible morbid condition of the system.

Dose.—For an adult, one tablespoonful three times a day, after eating; from seven to twelve years of age, one dessertspoonful; from two to seven, one teaspoonful; for infants, from five to twenty drops, according to age.

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T. B. Wheeler, M. D., Montreal, P. Q.
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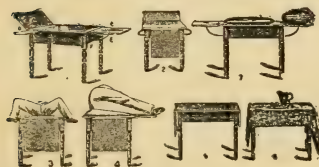
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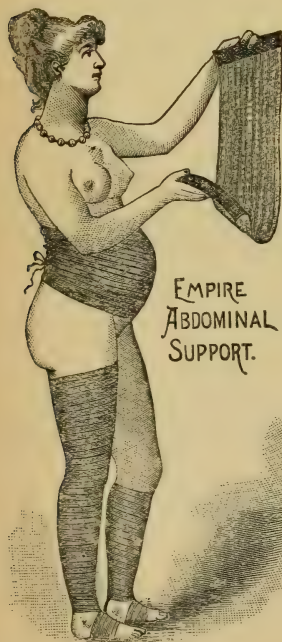
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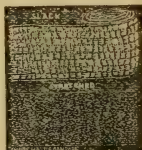
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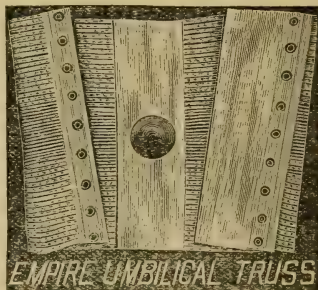
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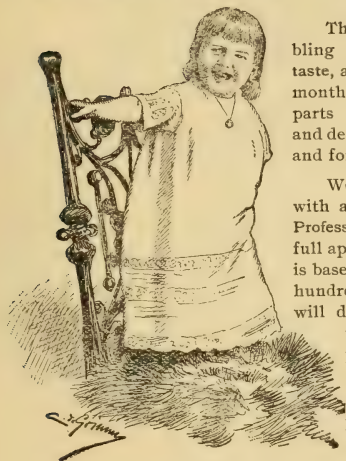


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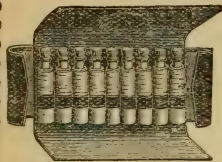
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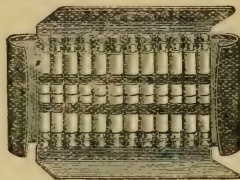
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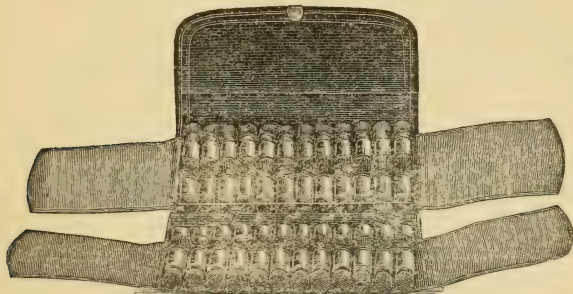
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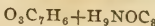
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